

1 FEDERAL TRADE COMMISSION

2 I N D E X (PUBLIC RECORD)

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4 WITNESS: DIRECT CROSS REDIRECT RECROSS

5 Horovitz 3605 (SP) 3701 (US) 3786 (SP) 3802 (US)

6 3709 (FTC) 3807 (FTC)

7 Cannella 3811 3860

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9 EXHIBITS FOR ID IN EVID

10 Commission

11 None

12 Schering

13 None

14 Upsher

15 Number 233 3840

16

17 OTHER EXHIBITS REFERENCED PAGE

18 Commission

19 CX 36 3772

20 CX 338 3782

21 CX 348 3705

22 CX 540 3751

23 CX 544 3779

24 CX 574 3760

25 CX 839 3767

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FEDERAL TRADE COMMISSION

In the Matter of:)
 SCHERING-PLOUGH CORPORATION,)
 a corporation,)
 and)
 UPSHER-SMITH LABORATORIES,) File No. D09297
 a corporation,)
 and)
 AMERICAN HOME PRODUCTS,)
 a corporation.)
 -----)

Thursday, February 14, 2002

9:30 a.m.

TRIAL VOLUME 16

PART 1

PUBLIC RECORD

BEFORE THE HONORABLE D. MICHAEL CHAPPELL

Administrative Law Judge

Federal Trade Commission

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Washington, D.C.

Reported by: Susanne Bergling, RMR

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1 P R O C E E D I N G S

2 - - - - -

3 JUDGE CHAPPELL: Good morning, everyone.

4 ALL COUNSEL: Good morning, Your Honor.

5 JUDGE CHAPPELL: Let's reconvene docket 9297.

6 Are you ready to call your next witness?

7 MR. NIELDS: Yes, Your Honor, but I also
8 realized at the end of the entire day yesterday, I
9 wasn't as fully informative as I might have been. We
10 are going to call first today Dr. Zola Horovitz. He is
11 a licensing and valuation expert who will be responding
12 to Dr. Levy, and Mr. Jason Raofield, Your Honor, from
13 my office will be handling his questioning. I think
14 you've met him before.

15 JUDGE CHAPPELL: Okay, right.

16 MR. NIELDS: We are -- and Mr. Horovitz is only
17 available -- is not available tomorrow, so we wanted to
18 start him at the beginning of the day.

19 Upsher has a witness who I think they are very
20 hopeful they can get on and off at the end of the
21 day -- that, of course, will depend on how long Dr.
22 Horovitz's testimony will go -- and that's Mr.
23 Cannella.

24 MR. CURRAN: That's right, Your Honor. Mr.
25 Cannella is here from out of town. We expect his

1 direct examination to be about half an hour, so we have
2 to see how things play out, but I'm hopeful that Dr.
3 Horovitz will be over by 4:00 or so and then Mr.
4 Cannella will be able to provide his direct and cross
5 testimony before the end of the day.

6 JUDGE CHAPPELL: And you've consulted with the
7 opposition?

8 MR. CURRAN: Well, I've consulted with Mr.
9 Nields, who I believe has --

10 MR. EISENSTAT: We are aware of this, Your
11 Honor, and we will, you know, do our best to
12 accommodate them. We can't guess yet how long our
13 cross examination will be really until we hear the
14 witnesses.

15 JUDGE CHAPPELL: But the person who will handle
16 that witness will be available today?

17 MR. EISENSTAT: Yes. Oh, yes, Your Honor.

18 MR. NIELDS: And then, Your Honor, tomorrow
19 Upsher has another witness who becomes completely
20 unavailable after tomorrow, that's Dr. Halvorsen. So,
21 that will be the witness for Friday, the partial day on
22 Friday.

23 JUDGE CHAPPELL: Okay.

24 MR. NIELDS: And then we will be calling Mr.
25 Audibert on Tuesday. As I recall, Monday is a holiday,

1 so our next day will be Tuesday, and that will be Mr.
2 Audibert, and I believe he will be followed by Mr.
3 Lauda.

4 JUDGE CHAPPELL: Okay, and regarding days off,
5 we originally scheduled the 25th, and I wanted to
6 maintain that we would have that day off, and I will --
7 assuming we're still in trial then, I'm hopeful we'll
8 wrap up before then, but assuming we're still in
9 trial -- but I would like everybody to check your
10 schedules and see if you are available on the 25th. If
11 not, that's okay, because we had originally blocked
12 that one off, but we are going to have to take the 27th
13 off. I have a commitment I have to attend to.

14 MR. NIELDS: For whatever it's worth, Your
15 Honor, we have been doing some talking, and there is
16 considerable more evidence to go on both sides, so that
17 the 25th -- I mean, we've been trying to figure out
18 ways of making it move quicker, but it might be a good
19 idea if we can make the 25th a trial day.

20 JUDGE CHAPPELL: It's okay with me. I thought
21 maybe you or someone had a conflict that day.

22 MR. NIELDS: I did have a problem, Your Honor,
23 but I think that this may take priority.

24 JUDGE CHAPPELL: It's always good to hear that,
25 Mr. Nields. Then just go ahead and let me know,

1 because I'm leaving it on my calendar for now that, you
2 know, I'm -- I'm here if you people are here.

3 MR. CURRAN: Your Honor, you may recall it was
4 my scheduling conflict that originally led to the 25th
5 being an off day. I had an argument scheduled in the
6 Fourth Circuit on Monday, the 25th, but that has been
7 postponed. The Court granted leave to reschedule that
8 argument in light of this proceeding.

9 JUDGE CHAPPELL: Right, okay. And so are you
10 saying now you want to go the 25th or do you still need
11 to check on your conflict?

12 MR. NIELDS: I probably ought to make just one
13 final check, Your Honor. It's a case I have argument
14 scheduled in, but I do not plan to be actually arguing
15 it. I think my client will accept the notion that I'll
16 be here.

17 JUDGE CHAPPELL: Or one of those Army from your
18 firm could sit here for you that day. That's up to
19 you.

20 MR. CURRAN: Mr. Nields won't say it, but he's
21 irreplaceable, Your Honor.

22 JUDGE CHAPPELL: Most lawyers probably won't
23 say that, but they think that. Judges too.

24 MR. NIELDS: But only about themselves, Your
25 Honor, lawyers only about themselves.

1 Your Honor, one other thing is that there is
2 one topic on which Schering -- that Dr. Horovitz may
3 testify about for which Schering gave less notice than
4 we had agreed we would give regarding documents that he
5 reviewed.

6 JUDGE CHAPPELL: So, what you are doing now,
7 you are trying to soften the normal morning bombardment
8 that I have.

9 MR. NIELDS: No, I am actually not, Your Honor.
10 I'm going to tell you we have reached an agreement.

11 JUDGE CHAPPELL: Excellent.

12 MR. NIELDS: And the agreement is that if we
13 decide that we need to go into that topic, we can bring
14 Dr. Horovitz back that -- it will be a week, because he
15 will be away every day in between, but we may bring him
16 back next Thursday to cover this one topic.

17 JUDGE CHAPPELL: And as I said early on, we are
18 going to have a record, and all these witnesses are
19 going to be in there somewhere. I'm going to dig them
20 out, and it's up to you all to point out to me in your
21 post-trial briefs.

22 And I think I said earlier but I'll
23 re-emphasize, you should probably get busy on those,
24 and I am going to need valid proposed findings of fact
25 and conclusions of law with record cites, cites to the

1 record and to exhibits. That's the only way it will
2 help me out.

3 MR. NIELDS: We have taken that to heart, Your
4 Honor.

5 JUDGE CHAPPELL: I just wanted to re-emphasize,
6 because the date for the initial decision is drawing
7 closer and closer.

8 So, with that, anything else?

9 MR. NIELDS: No, Your Honor, thank you very
10 much.

11 JUDGE CHAPPELL: Let's proceed.

12 MR. CURRAN: Your Honor, for Upsher-Smith, Mark
13 Gidley will be handling this witness.

14 JUDGE CHAPPELL: Okay, thank you.

15 Have you got a witness?

16 MR. RAOFIELD: Schering-Plough calls Zola
17 Horovitz, Your Honor.

18 JUDGE CHAPPELL: Raise your right hand, please.
19 Whereupon--

20 ZOLA P. HOROVITZ
21 a witness, called for examination, having been first
22 duly sworn, was examined and testified as follows:

23 JUDGE CHAPPELL: Thank you, be seated.

24 Sir, state your name for the record, please.

25 THE WITNESS: Zola Horovitz, H O R O V I T Z.

1 JUDGE CHAPPELL: You might want to spell your
2 first name.

3 THE WITNESS: Zola, Z O L A.

4 JUDGE CHAPPELL: Thank you.

5 MR. RAOFIELD: Your Honor, I have distributed
6 copies of a thin binder, I see that you have already
7 located that, and everyone already has a copy of that
8 as well, including the witness.

9 JUDGE CHAPPELL: I see he has his water bottle,
10 so I think we're ready. Go ahead.

11 MR. RAOFIELD: Thank you, Your Honor.

12 DIRECT EXAMINATION

13 BY MR. RAOFIELD:

14 Q. Good morning, Dr. Horovitz.

15 A. Good morning, Mr. Raofield.

16 Q. Where do you live, Dr. Horovitz?

17 A. In Boca Raton, Florida.

18 Q. And what is your profession?

19 A. I'm a consultant in the biotechnology and
20 pharmaceutical field.

21 Q. Dr. Horovitz, I'm going to ask you about your
22 education and employment history. Have you prepared a
23 slide that will assist in quickly bringing us through
24 your educational history?

25 A. Yes, I have.

1 Q. I will put that on the screen now. Is this the
2 slide you prepared?

3 A. Yes it is.

4 Q. Can you briefly describe for us any graduate or
5 postgraduate degrees you've received?

6 A. Yes, I have a Bachelor's in pharmacy and a
7 Master's and Ph.D. in pharmacology, the science of how
8 drugs work, all from the University of Pittsburgh, and
9 I did a post-doctoral fellowship at the Squibb
10 Institute for two years before I became a full-time
11 member of the Institute.

12 Q. And could you briefly take us through your
13 career in the pharmaceutical industry?

14 A. Yes. After doing research as a post-doc fellow
15 and then a member of the pharmacology department at
16 Squibb, I became director of that department in 1967,
17 and one of the assignments was to form a cardiovascular
18 group, which I did, and that group later led to the
19 discovery of the angiotensin converting enzyme
20 inhibitors, the first -- Captopril, the first drug for
21 Squibb to be a billion dollar drug and I think the
22 second billion dollar drug in the industry.

23 Q. Before you go on, Captopril, what is that drug
24 used to treat?

25 A. That treats both high blood pressure and

1 congestive heart failure.

2 Q. And you can continue with the next.

3 A. Yes, then in '72, I became associate director
4 of the Squibb Institute, which -- the Squibb Institute,
5 I should say, was the research and development arm of
6 the Squibb Corporation, and then in '79, VP of R&D,
7 moved over in '81 to be vice president of drug
8 development, and during that reign, I had
9 responsibility for groups that worked with the
10 manufacturing part of the company.

11 And then in 19 -- approximately 1986, I assumed
12 a new role for the company, VP, research planning and
13 scientific liaison. The reason for that new role was
14 that the company felt that the research people and the
15 business people, marketing, sales, et cetera, were not
16 communicating well, which was classic, I think, in the
17 industry, and it was my responsibility to make sure the
18 rest of the company knew what research was doing and
19 that research knew what the rest of the company was
20 interested in.

21 In 1989, Squibb and Bristol merged, and at the
22 time of the merger, I was appointed vice president of
23 licensing, a year later added business and commercial
24 development, and also -- it doesn't say there, but I
25 had a strategic planning group for the corporation.

1 And then in 1994, I accepted an early retirement
2 package from Bristol, and since 1994, I've been
3 consulting in the industry and serve on a number of
4 small to medium biotech or pharmaceutical company
5 boards.

6 Q. Dr. Horovitz, have you published any articles
7 or books?

8 A. Yes, I believe approximately 60-some articles
9 or chapters in books.

10 Q. And are you a member of any professional
11 associations?

12 A. Yes, a number. The Licensing Executives
13 Society, the Pharmacology Society and many, many more.

14 Q. And have you held any teaching positions?

15 A. I have had adjunct teaching positions at
16 Rutgers Medical School, Rutgers Pharmacy School, the
17 University of Pittsburgh Pharmacy School and Princeton
18 University.

19 Q. Dr. Horovitz, during your career, have you
20 received any awards?

21 A. Yes. There were I guess three I could comment
22 on. One was in -- when I was doing research in the
23 early sixties, received the A. E. Bennett Award for
24 Research in Biological Psychology, I believe I was the
25 first industry person to get that award. In the

1 seventies, I believe I was awarded a Distinguished
2 Alumnus Award from the University of Pittsburgh. And
3 in the early nineties, my team and I at Squibb who
4 discovered the angiotensin converting enzyme inhibitors
5 won the American Heart Discoverer Award.

6 Q. During your career in the pharmaceutical
7 industry, Dr. Horovitz, roughly how many licensing or
8 technology transactions would you say you have been
9 involved with?

10 A. Well, it would be a very rough answer, but I
11 would say in a range of 75, plus or minus.

12 Q. And did any of those involve the in-licensing
13 of a cholesterol-lowering drug?

14 A. Yes.

15 Q. And what drug was that?

16 A. That was a drug called pravastatin or the trade
17 name for Squibb and later Bristol-Myers Squibb was
18 Pravachol. That was the second discovered statin for
19 lowering cholesterol, affecting an enzyme which causes
20 a lowering of cholesterol.

21 MR. RAOFIELD: Your Honor, at this time we
22 offer Dr. Horovitz as an expert in the pharmaceutical
23 industry and licensing and evaluation of pharmaceutical
24 projects.

25 JUDGE CHAPPELL: Objection?

1 MR. EISENSTAT: No objection, Your Honor.

2 MR. GIDLEY: No objection, Your Honor.

3 JUDGE CHAPPELL: Okay, thank you. Hearing no
4 objection, he's accepted.

5 BY MR. RAOFIELD:

6 Q. Dr. Horovitz, have you been retained to offer
7 an expert opinion in this case?

8 A. Yes.

9 Q. And by whom were you retained?

10 A. By Schering Corporation through Howrey law
11 firm.

12 Q. When were you retained by Schering?

13 A. I believe it was early summer of 2001.

14 Q. Now, at that point, what opinions were you
15 asked to render?

16 A. First, upon being retained, I was asked to give
17 an opinion on the value of a deal done between
18 Upsher-Smith and Schering back in June of 1997 to try
19 to determine what the value to Schering would be for
20 doing that deal.

21 Q. And did there come a time when you were asked
22 to render subsequent opinions?

23 A. Yes, after I did my first report, first
24 opinion, I was then given more material and asked to
25 opine on a report by Dr. Nelson Levy, who was an expert

1 witness in the case, and comment on a number of issues
2 that he raised in his report.

3 Q. And are you prepared to testify as to your
4 opinions here today?

5 A. Yes.

6 Q. Dr. Horovitz, you referred to two parts of your
7 opinion. Would it be okay with you if I referred to
8 them as part one of your analysis and part two of your
9 analysis?

10 A. Correct, I believe that's what I did in the
11 full report, yes.

12 Q. With respect to part one of your analysis, what
13 materials did you rely on in forming your opinion?

14 A. The only thing I received was a redacted
15 contract. The redactions were the up-front payments
16 for the deal, so I did not know that; a commercial
17 analysis I believe done by Mr. Audibert; and a copy of
18 a document that looked like it was a slide
19 presentation -- I'm sorry -- that was presented from
20 Upsher-Smith to Schering-Plough concerning Niacor-SR;
21 and a couple documents referring to a product called
22 Niaspan from Kos Pharmaceutical Company, I believe one
23 was an S-1 that supported their IPO and then a couple
24 of analysts' reports on their product, Niaspan. And I
25 think that was all I received before I finished my

1 phase one.

2 Q. Based on your review of those materials, did
3 you form any opinions?

4 A. Yes, I did.

5 Q. And have you prepared a slide to help you
6 briefly take us through those opinions?

7 A. I believe so.

8 Q. The slide that I've put on the screen, is that
9 the slide that you had prepared?

10 A. Yes.

11 Q. Now, Dr. Horovitz, could you briefly explain
12 the conclusions that you've reached? And I'll ask you
13 to begin with the bullet point number one there.

14 A. Yes, before you can do a value on any project,
15 you have to look at hopefully a good P&L assessment,
16 and what makes up a good P&L assessment are the
17 assumptions. If the assumptions are no good, the
18 numbers are no good. So, I looked at the assumptions
19 and thought that they were reasonable and properly
20 conservative for the information that was available at
21 that time.

22 Q. And the second bullet point listed here, could
23 you explain that?

24 A. Yes, there was a royalty provision in the
25 agreement, which I did see the royalty provision,

1 between 10 and 15 percent, depending on the sales, and
2 for a drug like Niacor-SR, which was very close to
3 filing and hopefully approval, those were reasonable
4 royalty rates in the industry at that time.

5 Q. And finally, the third bullet point?

6 A. I did an analysis of the value, both the
7 internal rate of return and net present value of this
8 project based on the P&L statement, and I concluded
9 that Schering could have paid up to \$100 million for --
10 up front for the Niacor-SR and still obtained a
11 reasonable return on its investment.

12 Q. I'm going to put a single-page document up on
13 the ELMO. Give me a second here just to try to make
14 this...

15 For the record, this document has been marked
16 for identification as SPX 2240, and fortunately I have
17 a couple of additional copies of this, so if anyone has
18 difficulty reading --

19 A. Is that in my binder, because I can't --

20 Q. This one is not in your binder, no, Dr.
21 Horovitz.

22 A. Okay, I'll need a copy.

23 MR. RAOFIELD: Your Honor, may I approach the
24 witness?

25 JUDGE CHAPPELL: Yes.

1 THE WITNESS: Thank you.

2 JUDGE CHAPPELL: Thank you.

3 BY MR. RAOFIELD:

4 Q. Dr. Horovitz, a moment ago you were discussing
5 the third bullet point on your part one analysis slide,
6 and you made reference to the calculations you did to
7 conclude that Schering would have paid up to \$100
8 million for Niacor-SR.

9 A. Correct.

10 Q. The document that I've handed you and that I've
11 put up on the screen, SPX 2240, are those the
12 calculations that you performed?

13 A. Yes, this looks like a copy of the table that I
14 attached to my part one report.

15 Q. Now, the document is entitled Internal Rate of
16 Return and Net Present Value Analysis. Could you
17 explain what net present value is?

18 A. Well, for a ten-year period, I did a cash flow
19 projection and determined the value to Schering in
20 millions of dollars for doing this deal based on a
21 number of different up-front payments, because I did
22 not know at the time what the actual up-front payment
23 was. So, I arbitrarily took a range from \$12 and a
24 half million up to \$100 million as the up-front payment
25 and then calculated the value to Schering, and those

1 are the numbers you see at the bottom, for each of
2 those dollar payments.

3 Q. And generally, not specific to your
4 calculations here, what is the purpose of a net present
5 value analysis calculation?

6 A. Well, it's to get an idea of what the project
7 will return as far as profit to -- and cash flow to the
8 company.

9 Q. Now, turning back to the document again,
10 towards the bottom, next to where you have net present
11 value, I see a 10 percent number. Could you explain
12 what that refers to?

13 A. Yes, that's a discount value. I used a 10
14 percent discount. Whenever I did net present values, I
15 always used some discount value, unless the project is
16 already on the market, because there is some risk to
17 the capital that you're going to invest. If this drug
18 was in an early phase of development, I would have used
19 a higher discount value. In this case, something
20 that's near, very near filing with a regulatory body, I
21 generally would use about 10 percent.

22 Q. And you said that when a drug is earlier in
23 development, you'll use a higher discount percentage.
24 Why would you use a higher discount percentage?

25 A. Because there's more risk. There's more risk

1 to you actually obtaining that pay-back, that amount of
2 money, because there's chances the drug will be delayed
3 or fall out of bed.

4 Q. Dr. Horovitz, could you explain now what
5 internal rate of return is?

6 A. Yes, that's the percent return on their money
7 for the investment. Here, with each of these projected
8 possible payments, which represented most of the money
9 Schering would expend to get this drug on the market,
10 you want to know what the return is on them making that
11 investment. They can take their \$100 million, let's
12 say it's \$100 million, and invest it in secure
13 treasuries or something like that and get a certain
14 return.

15 In this case, we determined that if this
16 project went the way it was planned, they could get a
17 return of 35 percent on that \$100 million, and most of
18 the pharmaceutical companies I'm familiar with, they
19 would be very happy with that return.

20 Q. At the time that you made these calculations,
21 did you make any assumptions as to how the payments
22 would be made over time for each of these various
23 scenarios?

24 A. Well, no, I knew from reading the redacted
25 document that the payments were spread out over two

1 years, though I didn't know what they were, but I felt
2 for ease and lack of complexity that I would just make
3 it that Schering would pay all of these up front.
4 Obviously, if the total payment would be spread over
5 two years, these numbers would look better to Schering,
6 because they would have use of their money for two
7 years -- some of their money for two years, and it
8 would be a better return. But -- so, I used a
9 conservative approach of just everything being paid at
10 the signing of the agreement.

11 Q. It appears that you -- I think you testified
12 you have five payments that you selected, and we don't
13 have to go through each one, but taking a look, for
14 example, at the \$50 million payment?

15 A. Correct.

16 Q. What did you calculate the net present value
17 and internal rate of return on a \$50 million payment
18 would be?

19 A. The net present value at a 10 percent discount
20 would come out to about \$255 million, and the internal
21 rate of return, about 56 percent.

22 Q. And with the \$75 million payment at signing?

23 A. The net present value was \$230 million and the
24 internal rate of return was about 43 percent.

25 Q. And the \$100 million payment at signing?

1 A. Was \$205 million for \$100 million payment, and
2 internal rate of return, 35 percent.

3 Q. Dr. Horovitz, with respect to the \$100 million
4 payment, do you have an opinion as to whether an
5 internal rate of return of 35 percent is a reasonable
6 return on that investment?

7 A. Yes, as I said, most pharmaceutical companies
8 would be happy with an internal rate of return of 35
9 percent on their money.

10 Q. And Dr. Horovitz, during your part one
11 analysis, did you reach any conclusions as to what
12 would have been a reasonable payment for Schering to
13 make for the rights to Niacor-SR as those rights are
14 provided for in the Schering-Upsher agreement?

15 A. Yes, in my report I indicate that I believe
16 that certainly up to \$100 million as an up-front
17 payment would have been a good return for Schering on
18 this deal.

19 Q. And Dr. Horovitz, at the time that you reached
20 that opinion, did you have any information regarding
21 the amount of the up-front and milestone payments that
22 Schering had actually agreed to make for that product?

23 A. No.

24 Q. We're done with that document, you can put that
25 one aside.

1 Now, you mentioned, Dr. Horovitz, that there
2 were two parts of your analysis, and again, I think you
3 said it would be okay, would it be okay if I referred
4 to part two as your part two analysis?

5 A. Correct.

6 Q. Could you briefly describe what opinions you
7 were asked to render after you had completed part one
8 of your analysis?

9 A. Well, in summary, I was given -- after my part
10 one analysis was done, I was given Dr. Levy's expert
11 report and some other documents, some deposition
12 transcripts, and asked to comment on issues that were
13 raised by Dr. Levy in his report.

14 Q. Did you consider any additional materials in
15 forming your part two opinion?

16 A. Yes, quite a few.

17 Q. And what types of materials?

18 A. Depositions, the expert reports, literature,
19 which I looked up, PDR, labeling for drugs, and
20 obviously memos and documents that related to some of
21 the issues that Dr. Levy mentioned.

22 Q. You may have mentioned this, but I'm not sure I
23 heard it. Did you review any depositions?

24 A. Yes. Yes, I did.

25 Q. On the basis of those materials, did you form

1 any opinions?

2 A. Yes.

3 Q. And have you prepared a slide to assist you in
4 briefly outlining your part two analysis?

5 A. Yes.

6 Q. I'll put that slide up on the screen now.

7 Is this the slide that you prepared, Dr.
8 Horovitz?

9 A. Yes, um-hum.

10 Q. Now, it appears that there are five bullet
11 points. Beginning with the first bullet point, could
12 you briefly describe what that refers to?

13 A. Well, in my report, I pointed out that niacin,
14 although originally discovered as a vitamin, had been
15 shown to lower cholesterol and have a profile of
16 lowering cholesterol that was probably better than any
17 other type of drug around. It did the right things.
18 It lowered low density, the bad cholesterol; it lowered
19 triglycerides; it lowered Lp(a), a protein, Lp, little
20 (a), which people believed was responsible for some of
21 the clogging of the arteries in the heart and vessels;
22 and it raised HDL, the high-density lipoproteins or the
23 supposedly good lipoproteins. So, it had a good
24 spectrum of action.

25 However, it had problems. Some of the side

1 effects were somewhat debilitating, especially the side
2 effect of flushing, which is essentially part of its
3 pharmacology. Niacin will cause the peripheral vessels
4 to dilate and the redness -- in some people the redness
5 and the itching that occurs with that pharmacological
6 effect is -- bothers people, and they stop taking the
7 drug, which, of course, isn't good for their therapy.

8 Q. Okay. And with respect to the second bullet
9 point, could you just briefly describe -- we will come
10 back to it later -- but could you just briefly describe
11 what your bullet point refers to?

12 A. The second one?

13 Q. Yes.

14 A. Well, in the mid-1990s, it was hoped that a
15 sustained release formulation of niacin would solve
16 some of the problems of the flushing side effects and
17 yet still give you good efficacy for lowering
18 cholesterol and you would have a much better product.

19 Q. And what are you referring to as market
20 opportunity?

21 A. Well, a couple things. One, the statins at
22 that time were really taking hold in the marketplace,
23 but physicians felt in a number of patients they needed
24 something else to -- to add on to the statins to really
25 get the kind of control they wanted.

1 And secondly, there apparently was a market
2 opportunity for the SR niacin, and that relates to what
3 this company Kos was doing with a formulation of
4 sustained release niacin. They had formed a company.
5 Their major product was the SR niacin called Niaspan,
6 and they had a lot of stock analysts doing projections
7 on excellent sales for that product, and they also did
8 an IPO, initial public offering, which the marketplace
9 and investors put in a large amount of money primarily
10 because they felt that Niaspan was going to be a good
11 product for Kos.

12 Q. And the next bullet point is, "Niacor-SR
13 Product Profile."

14 What was the purpose of that part of your
15 analysis?

16 A. Yes, the purpose there was to look at
17 Niacor-SR. Dr. Levy had made some major comments about
18 the -- both the efficacy and side effect profile, and I
19 analyzed the data that was known to Schering in June of
20 '97 and determined it had an efficacy profile that was
21 certainly sufficient to treat patients and get approval
22 and a better side effect profile, especially on
23 flushing, than the previous Niaspan product -- I'm
24 sorry, previous niacin products.

25 Q. And the next bullet point refers to, "Strategic

1 value Niacor presented to Schering."

2 Again, without going into detail, could you
3 just state what the purpose of that part of your
4 analysis was?

5 A. Well, briefly, any pharmaceutical company in
6 the mid-nineties was very interested in the lowering
7 cholesterol market. This market was really taking off
8 because of the statins. Schering I found out had a new
9 mechanism product for lowering cholesterol called
10 ezetimibe in their research pipeline, and I think
11 strategically, it was very important for them to get
12 into this field, to have their sales force, their
13 marketing people and all their executives experienced
14 and knowledgeable in the cholesterol-lowering field
15 before they would be introducing ezetimibe, a novel new
16 type of cholesterol-lowering agent, some years later.

17 Q. And finally, the last bullet point, what was
18 the purpose of that part of your analysis?

19 A. Yes, this was just a more detailed look at the
20 assumptions supporting the P&L that was given to
21 Schering's board to approve this project, and by more
22 detailed, I mean I now was able to look at more
23 documents than I had in my phase one report.

24 Q. I'd like to turn now to -- the first bullet
25 point that you have there is the immediate and

1 sustained release niacin generally, and beginning with
2 that, could you tell us what was known in the early to
3 mid-1990s about the efficacy of niacin generally?

4 A. Yes, niacin, as I think I said, was a very good
5 agent for giving you the right cholesterol profile,
6 lowering the right things and raising HDL, but it had
7 side effects, like flushing, which were something that
8 kept its usage down.

9 Q. When was niacin discovered to have the efficacy
10 profile that you just described?

11 A. Oh, I'm not sure I remember exactly.

12 The other thing, of course, that happened with
13 niacin, it was used in some large clinical trials on
14 patients with heart disease, and it was shown to
15 decrease significantly the morbidity and mortality of
16 patients with heart disease. So, this was a clinical
17 effect that niacin was proven to have, which was, of
18 course, very beneficial to the patient.

19 Q. Well, a moment ago you had referred to efficacy
20 in terms of altering the lipids in the blood.

21 A. Yes.

22 Q. And now you're referring to what you called
23 morbidity and mortality. Could you explain the
24 difference between those two?

25 A. Sure. This measure in cholesterol is called a

1 surrogate marker. It means I'm using the cholesterol
2 levels as a marker to say I believe -- excuse me -- I
3 believe that doing that is going to benefit the
4 patient, but just lowering cholesterol doesn't mean it
5 benefits the patient. You really want to be able to
6 show that lowering cholesterol correlates with the
7 patient having fewer heart attacks, having better flow
8 in its -- in his or her arteries, et cetera, et cetera.
9 That's a clinical outcome.

10 So, preventing heart attacks, having better
11 blood flow, taking a debilitated cardiovascular patient
12 back to work, that's -- those are clinical outcomes,
13 and the data supported the fact that using niacin and
14 later on using the statins, lowering cholesterol
15 correlates with that better clinical effect.

16 Q. Now, Dr. Horovitz, given that niacin generally
17 was recognized as an effective anti-cholesterol drug as
18 you've testified, was it experiencing widespread use in
19 the marketplace in the early to mid-1990s?

20 A. It was used, but I would not call it
21 widespread, and I think the reason was as I said, that
22 the flushing, especially the itching side effect,
23 prevented its widespread use.

24 Q. And can you just describe what flushing is?

25 A. I think I did before. It's a vasodilatation

1 that is part of the pharmacology of niacin, and it --
2 niacin will vasodilate almost every patient, but some
3 get a response of the blood flowing quickly to the
4 periphery, and you see the redness, flushing, and some
5 of these patients also get itching because of that.

6 Q. Now, Dr. Horovitz, in addition to Niacor-SR,
7 are you familiar with an additional product referred to
8 as Niaspan?

9 A. Yes.

10 Q. And do each of those products, Niacor-SR and
11 Niaspan, have niacin as their active ingredient?

12 A. Yes, those are both products that have niacin
13 in a controlled release dosage form.

14 Q. And did each of those products -- were -- so,
15 each of those products were sustained release you just
16 said. What was the significance of the sustained
17 release form of those drugs?

18 A. Well, it was hoped -- sustained release
19 technology was developed with the hope that they could
20 take drugs that had either efficacy or side effect
21 problems and by controlling their release improve on
22 their efficacy and also decrease side effects.

23 Q. I'm going to ask you to explain how the
24 sustained release technology was designed to overcome
25 the flushing side effect, but I'm going to ask you to

1 put aside Niaspan and Niacor and refer to just
2 sustained release niacin generally.

3 Have you prepared a slide to assist you in
4 explaining that?

5 A. Yes, I have.

6 Q. What I've put on the screen there, is that the
7 slide that you had prepared?

8 A. Yes.

9 Q. Using this graph, could you briefly explain how
10 the sustained release technology was used to reduce the
11 flushing side effects?

12 A. I'll try. Below we're plotting hours, it's a
13 24-hour day, and actually the label for the other
14 ordinate isn't there, but it's blood -- it's
15 essentially blood level. So, if you look at the
16 regular niacin, which is called IR niacin, internal
17 release niacin --

18 Q. And that's the red line?

19 A. That's the red line, and we've arbitrarily here
20 said we're going to give this patient one tablet three
21 times a day, and you can see the blood level rises
22 pretty rapidly, goes up to a peak, high peak, and then
23 returns, and then eight hours later you give another
24 drug, and that same curve shows up.

25 With the SR, the formulation delays the release

1 of the product into the bloodstream so that there is a
2 different kind of curve. It goes up more gradually,
3 its peak -- the blue, we're now talking about the blue
4 dashed line -- its peak is much lower, and it returns
5 and you lose efficacy threshold much longer.

6 Now, arbitrarily, I took what might be called
7 the flushing threshold, i.e., a blood level above which
8 you get a lot of flushing and it becomes a problem for
9 the patient, and I took an efficacy threshold, and you
10 can see with the red, the IR, the immediate release
11 niacin, you get certainly efficacy, but you also get a
12 lot of time when the -- you're well above the flushing
13 threshold. That is not the case with the SR, where you
14 are a longer period of time in the efficacy threshold
15 but very little above the flushing threshold.

16 So, the design is to keep or prolong efficacy
17 and decrease a side effect that might be related to
18 high blood level peaks.

19 Q. Now, aside from Niaspan and Niacor-SR, had any
20 other companies tried to use the sustained release
21 technology to overcome the flushing side effect
22 experienced with immediate release niacin?

23 A. Yes, I believe there were a few in the earlier
24 nineties, but none of them ever were studied towards an
25 NDA approval, so it's hard to gauge how effective or

1 how good they were, but there were some available in
2 the over-the-counter market.

3 Q. Now, aside from the flushing, were any of those
4 prior sustained release versions of niacin associated
5 with any additional side effects?

6 A. Yes. There -- they were associated in some
7 literature with an increase in liver function enzymes.

8 Q. Now, you said they were associated in the
9 literature, I believe?

10 A. Yes.

11 Q. Could you give us an example of a published
12 study which associated sustained release niacins with
13 elevated liver enzymes?

14 A. Yes. There -- the main article, which
15 unfortunately was referred to many, many times
16 afterwards, was an article by McKenney in the Journal
17 of the American Medical Association, where he studied a
18 product that was a sustained release niacin product
19 from a company called Gold Line, and he had a high
20 percentage of patients who had increased liver function
21 enzyme values. I think 60-70 percent of his patients
22 did.

23 He then did a literature survey and found a
24 couple of other studies with sustained release niacin
25 that indicated some hepatitis with -- in a few

1 patients. He concluded -- and, you know, that was all
2 fine. Unfortunately, his conclusion was that all SR
3 niacin products were hepatotoxic, which was definitely
4 not a conclusion he could make from the data he had.

5 Q. Dr. Horovitz, what is hepatotoxicity?

6 A. Yes, hepatotoxicity is a toxicity of the cells
7 in the liver. When liver cells are stressed, they will
8 tend to break up a little bit, and enzymes will be
9 released, and that's why liver function enzyme measures
10 in the blood are an indication that the liver is being
11 stressed. They're not necessarily an indication of
12 hepatotoxicity. Hepatotoxicity will occur if enough of
13 the liver cells are stressed, but liver function tests
14 can go up for a number of reasons.

15 Q. So, there's a distinction you're saying between
16 one and the other, between hepatotoxicity and elevated
17 liver enzymes?

18 A. That's correct. To say it again, to be clear,
19 liver function elevations are an indication that the
20 liver has some stress. Hepatotoxicity may result, and
21 it's certainly something to think about if you get
22 increased liver function tests, but there are a number
23 of things that can cause it.

24 Q. What does -- what significance, if any, does
25 that distinction have when evaluating the side effects

1 of cholesterol-lowering drugs?

2 A. Well, it's -- all cholesterol-lowering drugs, I
3 believe, will cause some increases in liver function
4 tests in some patients, and I believe they all have
5 labeling that indicates that periodically, the
6 physician should take a blood sample and have that sent
7 to the lab and tests done for liver function -- I'm
8 sorry, for liver enzymes.

9 If the liver enzymes are continuously high or
10 going up to dangerous levels, then, of course, the
11 physician should stop the drug before anything further
12 happens to the liver. That happens in a small
13 percentage of patients with a number of drugs, not only
14 cholesterol-lowering.

15 Q. Now, when you refer to liver enzymes, is there
16 one type of liver enzyme or are there multiple types of
17 liver enzymes?

18 A. Well, most of the time the measures are what is
19 called ALT, alanine transaminase, and AST, aspartame
20 transaminase. There are other liver enzymes that you
21 could measure, but those laboratory tests are very
22 difficult. The ALT and AST are easy to measure now for
23 most outside laboratories, and it's a fast test, a
24 relatively cheap test, and that's what's used by many.

25 Q. Is a shorthand way to refer to ALT and AST

1 collectively to refer to them as LFTs, liver function
2 tests?

3 A. Yes, we can do that.

4 Q. And would that be okay, if when I refer to LFTs
5 or liver function tests, you just assume that I am
6 referring to ALT and AST?

7 A. That's fine.

8 Q. In reaching your opinions in this case, was
9 there any particular level of elevation of LFTs or
10 liver function tests that you viewed as relevant?

11 A. Well, the -- for a long time, the Food and Drug
12 Administration has set criteria at three times the
13 upper limit of the normal range for the laboratory.
14 So, if the laboratory's upper limit -- and by upper
15 limit and lower limit, I mean the variation, because
16 there is variation in these tests. You don't always
17 get the same number from the same sample. So, if you
18 do the same sample a number of times, you'll get a
19 range.

20 So, let's say that range is somewhere between
21 15 and 20, 20 is the upper limit, and so if you go
22 three times that, it's 60. That's a sign that you
23 better consider maybe stopping the drug for a while or
24 switching to another drug or something like that.

25 Q. Now, in the real world, if a physician is

1 treating a patient with a cholesterol-lowering drug and
2 the patient experiences liver enzyme elevations of
3 three times the upper limit of normal, what might the
4 physician do to address that situation?

5 A. As I said, he would probably stop the drug. He
6 might then restart it, and sometimes it never goes up
7 again, or he may switch to a different drug in the same
8 class, say if it's a statin to another statin, or he
9 may switch to a different mechanism drug, a niacin or a
10 fibrate or one of the other ways of lowering
11 cholesterol.

12 Q. And will a physician -- at that point, does the
13 physician conduct multiple measures or single measures
14 or --

15 A. Well, he should at least wait until he has two
16 tests, because there is not only a variation in the
17 laboratory, there are cases where laboratories have
18 shown large spikes in liver enzyme tests, and then it
19 never happens again. So, it's a one-time phenomena, it
20 could have been a mistake in the lab, could have been
21 the patient was heavily exercising or drinking alcohol
22 right before the test.

23 So, you usually -- it's recommended that you do
24 two tests, and if both tests are high, above three
25 times upper limit of normal, then that should be a

1 warning to the physician.

2 Q. Dr. Horovitz, are drugs the only thing that can
3 cause elevated liver enzymes?

4 A. No, as I just said, that alcohol use can,
5 severe exercise can, other drugs, concomitant drugs
6 like aspirin can, and, of course, disease like
7 cirrhosis or hepatitis can, and the liver enzyme
8 changes could be an indication of a disease process
9 having nothing to do with a drug.

10 Q. Now, you referred a moment ago to the FDA using
11 three times the upper limit of normal, and my question
12 is whether you've seen any evidence in this case with
13 respect to the Niacor-SR clinical studies that would
14 support your conclusion that that would be the relevant
15 standard.

16 A. Well, I believe that that is the standard they
17 used for stopping treatment in their protocols, in
18 their two pivotal trials.

19 Q. I'm going to refer you to a document in your
20 binder marked SPX 267. I believe it's actually the
21 last one in the binder based on the numbering.

22 Dr. Horovitz, do you recognize this document?

23 A. Yes, I've seen it.

24 Q. And what does this document show -- tell you
25 that's relevant to your analysis?

1 A. It's a telephone communication record between
2 Upsher and the FDA, and the response from the FDA in
3 the second page indicates that they stated that the FDA
4 considers liver function tests equal to or greater than
5 three times the upper limit of normal on two occasions
6 to be of clinical significance, and they ask for
7 really -- their analysis to be two groups, one the --
8 any patient who was two times the upper limit of normal
9 and above and any that were three times the upper limit
10 of normal or above.

11 Q. And is that the passage that I just highlighted
12 and put up on your screen?

13 A. Yes. That and the next sentence, too.

14 Q. And the next sentence as well.

15 And Dr. Horovitz, a while ago you referred to
16 studies that were published in the 1990s, I believe you
17 referred to one in particular. Again, what was the
18 product tested in that study?

19 A. Are you referring to the McKenney study?

20 Q. I believe that's the study that you referred
21 to. You can correct me if I'm wrong.

22 A. Yes. It was a sustained release product
23 according to the report made by a company called Gold
24 Line, which at that time was a generic pharmaceutical
25 house.

1 Q. And that was a sustained release niacin
2 product?

3 A. That's what they claimed, yes.

4 Q. Do you recall whether that study indicated what
5 percent of patients experienced liver enzyme elevations
6 at three times the upper limit of normal?

7 A. I recall that it was very high, 60-70 percent
8 range.

9 Q. Dr. Horovitz, are you aware of the level of
10 elevation that Dr. Levy, complaint counsel's expert,
11 considered relevant in evaluating the incidence of
12 liver enzyme elevations in this case?

13 A. Yes, I believe he considered anything above 1.5
14 times the upper limit.

15 Q. And do you agree with Dr. Levy's consideration
16 of the elevation of liver enzymes above 1.5 times the
17 upper limit of normal?

18 A. No.

19 Q. And why not?

20 A. Well, most studies will allow patients into the
21 study if they have something like 1.2, 1.4, maybe up to
22 1.5 times the upper limit of normal. So, if you use
23 Dr. Levy's criteria and you have patients who are
24 entered very close to that criteria already, just a
25 slight laboratory change can throw them into being --

1 into being rejected or to, you know, be taken off the
2 study medication.

3 Q. Actually, I'm just going to flip this over if I
4 could and write on the back of this.

5 You referred earlier to what you said you would
6 just assume for your argument was 15 to 20 was the
7 normal range.

8 A. Okay.

9 Q. And these -- that would refer to the laboratory
10 value as opposed to a specific level of elevation,
11 correct?

12 A. That's laboratory values that are normal,
13 meaning that lab had done a lot of testing of the same
14 sample, and the range almost always -- the result
15 almost always came between that 15 and 20.

16 Q. And in your previous answer when you were
17 talking about the inclusion/exclusion criteria at 1.5
18 times the upper limit of normal, what would -- what
19 level could a patient, if you were to assume that the
20 laboratory at that time was using a range of 15 to 20,
21 what level could a patient enter a study and still be
22 below the 1.5 times the upper limit of normal?

23 A. Well, if my math is right, that means 30 would
24 be 1.5 times the upper limit at this level.

25 Q. So, a given patient could enter the study with

1 let's say a laboratory value of 29. Is that correct?

2 A. And be accepted in the study, correct.

3 Q. And I seem to be writing a little bit too big,
4 so let me back up and try to fit it on the screen.

5 Now, if the patient experienced during the
6 course of the study an elevation to, let's say, 31,
7 would that patient have now experienced an elevation?
8 And I did it again here, let me just -- would that
9 patient have now experienced an elevation? Having gone
10 from 29 at the time of entry of the study to 31 during
11 the course of the study, would that patient have now
12 experienced an elevation to 1.5 times the upper limit
13 of normal?

14 A. That patient would be over that criteria.

15 Q. And do you consider it significant that a
16 patient would experience an elevation from 29 before
17 entering a study or before beginning taking a drug to
18 31?

19 A. No, I think that's well within the limit of
20 normal variation.

21 Q. Even though that patient is now above 1.5 times
22 the upper limit of normal?

23 A. That's correct.

24 Q. Dr. Horovitz, I believe we've now covered --
25 I've put back up on the screen the slide that you had

1 used to outline your part two analysis, and I believe
2 that we've now covered the first bullet point, and I
3 would like to move us now to the second bullet point
4 you identify on here, "Market Opportunity for an SR
5 Niacin in the Anti-Cholesterol Market as of June of
6 1997."

7 Could you briefly -- when you performed this
8 part of your evaluation, what was the purpose?

9 A. Well, the purpose was to look at whether
10 Niacor-SR was a reasonable drug for Schering to
11 consider, i.e., was there market opportunity for that
12 product at that time.

13 Q. And did you reach any conclusions?

14 A. Yes.

15 Q. And what conclusions did you reach?

16 A. My conclusions were that it was a reasonable
17 product, that there was a need for a different type of
18 niacin product in the marketplace, and there was a need
19 for a different mechanism than the statins in the
20 marketplace at that time.

21 Q. And I believe earlier in referring to part one
22 of your analysis you said that some of the documents
23 you relied upon related to a company called Kos
24 Pharmaceuticals. Is that correct?

25 A. That's correct.

1 Q. And did those documents relate to this part of
2 your analysis?

3 A. Yes.

4 Q. And how did they relate to this part of your
5 analysis?

6 A. Well, Kos had been developing this product
7 called Niaspan, which is a sustained release niacin
8 product, and they had a lot of information on their
9 product, although it wasn't available in great detail.
10 They had done market research. In their S-1 document
11 for their IPO, they described what they thought the
12 marketplace was. Analysts, since the product was late
13 stage, analysts had picked it up, and those analysts
14 that followed Kos were projecting a marketplace for
15 their sustained release niacin in the U.S. only.

16 And I think that information and, as I said
17 before, the fact that the public and the bankers were
18 supporting investing a lot of money into Kos indicated
19 that there was major interest in a niacin SR product at
20 that time.

21 Q. Moving now to the third bullet point that you
22 have here, the "Niacor-SR Product Profile," and then
23 below that you have got two subpoints, "Efficacy
24 Profile" and "Side Effect Profile."

25 A. Um-hum.

1 Q. What was the purpose of that part of your
2 analysis?

3 A. Well, as far as efficacy, I wanted to make sure
4 that the data available would indicate that Niacor-SR
5 could be approved by any regulatory body, and if you
6 look at the Food and Drug Administration criteria, they
7 wanted the pivotal studies on a niacin SR drug to show
8 at least a 15 percent decrease in LDL, and indeed,
9 that's what the data of the Upsher-Smith study showed.

10 Q. What information did you review in this part of
11 your analysis?

12 A. This was the documentation that Upsher-Smith
13 provided Schering on the two pivotal studies, I think
14 it's 115 and 221. One combined a -- one compared the
15 drug at different doses to an immediate release niacin,
16 and the other study compared different doses to the --
17 to a placebo.

18 Q. And for the record, in your binder, is the
19 document you're referring to -- I believe it's actually
20 the first one there, CX 1042?

21 A. Yes, that's it.

22 Q. And is it your understanding -- do you have an
23 understanding one way or the other as to whether or not
24 this document was provided to Schering in June of 1997?

25 A. Yes, my understanding, that it was received in

1 early June of '97.

2 Q. Dr. Horovitz, what did you conclude with regard
3 to the efficacy of Niacor-SR?

4 A. That it lowered LDL, triglycerides and Lp(a),
5 and it raised levels of HDL.

6 Q. Do you recall what doses were tested in the
7 Niacor-SR pivotal studies?

8 A. Yes. The IR study -- the immediate release
9 study compared 1000, 1500 and 2000 milligrams, and I
10 believe the placebo study was 500, 1000 and 2000.

11 Q. Do you recall what the data showed with respect
12 to the efficacy in reduction of LDL with respect to the
13 1000, 1500 and 2000 milligram doses?

14 A. Well, I don't know the exact numbers, but
15 looking at the 15 percent criteria, it was more than 50
16 percent decrease -- more than 15 percent decrease at
17 1500 and 2000. I'm not sure the 1000 reached that
18 criteria. It was close, but it didn't make it.

19 Q. Now, does that -- if the 1000 didn't reach that
20 criteria, does that mean the 1000 milligram dose was
21 not effective in lowering LDL levels in any of the
22 patients?

23 A. No, not at all.

24 Q. And why doesn't it mean that?

25 A. Well, that's an average decrease from all the

1 patients in the study. So, some of them I'm sure were
2 slightly higher, a number lower than the 15 percent,
3 but even if it was only lowered 10 percent in some
4 patients, that could be significant.

5 Q. Dr. Horovitz, focusing on the 1500 milligram
6 dose and the 2000 milligram dose in the Niacor-SR
7 pivotal studies, did you reach any conclusions as to a
8 comparison of the efficacy of those two doses? And I'm
9 talking now not specifically LDL but all of the lipid
10 parameters.

11 A. Which two, the --

12 Q. The 1500 milligram and the 2000 milligram dose.

13 A. Yeah, as I remember, they were pretty
14 equivalent. The 2000 was a little more potent, but
15 there wasn't a significant difference among the two.

16 Q. Now, returning to the side effect profile that
17 you identified on your slide, what if you -- what, if
18 anything, did you conclude about the flushing side
19 effect with Niacor-SR in the pivotal studies?

20 A. Well, it was clear from the 115 study, I
21 believe, that the SR product had significantly
22 decreased the amount of flushing. It didn't eliminate
23 it but significantly decreased it from the immediate
24 release product.

25 Q. Now, as with the efficacy, is the data that you

1 relied upon in forming that conclusion part of the
2 document CX 1042?

3 A. Yes.

4 Q. And did you prepare a slide to help you explain
5 the data that you relied upon in reaching this
6 conclusion?

7 A. Yes.

8 Q. I've put a slide up on the screen. Is this the
9 slide that you're referring to?

10 A. I believe so, yes.

11 Q. Just generally, to begin with, could you
12 explain what the data on the slide represent?

13 A. Well, it compares from the 115 protocol and
14 study the results from four groups. Group A is the
15 immediate release niacin product. Groups B, C and D
16 are sustained release at different doses, the 1000,
17 1500 and 2000.

18 Q. And beginning with that top line there, it
19 says, "Average number of flushing episodes per
20 patient."

21 By the way, before I turn to that, let me just
22 state for the record that within CX 1042, and as
23 indicated, I think, at the bottom of the slide on the
24 screen, this data are pulled from the Bates number SP
25 1600089.

1 Dr. Horovitz, the first row there is identified
2 as, "Average number of flushing episodes per patient,"
3 and could you explain the significance, if any, of that
4 to your conclusion?

5 A. Well, they looked at each patient, how many
6 flushing episodes during the trial, and then just got
7 an average, and I think it's clear that they've
8 decreased the average number of flushing episodes in
9 this study by at least four to five fold from the
10 immediate release product.

11 Q. And we don't have to, again, go through all of
12 these lines that you've listed here, but, for example,
13 turning to the average -- or the average percent of
14 patients -- the line is, "Patients with greater than
15 100 flushing episodes."

16 A. Um-hum.

17 Q. Could you explain the significance of that line
18 to your conclusions, if there is any?

19 A. Well, once again, if you just take a cut as to
20 in the whole study how many patients had more than 100
21 flushing episodes, you can see 50 percent with the IR,
22 the immediate release product, and down in the range of
23 10 percent or below with the sustained release product.

24 Q. And how about the other line I guess we can
25 take a look at, it's the next one, "Patients with

1 greater than 200 flushing episodes." What's the
2 significance of that one?

3 A. Yes, here the IR showed 30 patients who had
4 greater than 200 over the test period and 1 percent or
5 2 percent with the SR.

6 Q. And so the record is clear, when you said 30
7 patients, did you mean 30 percent?

8 A. Thirty percent, I'm sorry, 30 percent of the
9 patients in the trial.

10 Q. Dr. Horovitz, have you reached any conclusions
11 about whether the flushing with Niacor-SR was
12 sufficiently reduced such that Niacor-SR met the
13 product opportunity of an SR niacin you identified
14 earlier?

15 A. Well, I think my conclusion is that there is
16 significant decrease, although not elimination, of the
17 flushing episodes and that the tolerance -- the
18 tolerance for the patient would be much better and thus
19 more patients would stay on their regimen and use the
20 product than would use the immediate release product.

21 Q. Now, before moving off of the flushing data
22 that you reviewed for Niacor-SR, I'm going to ask you
23 if you're able to reach any conclusion in terms of
24 making a comparison of the flushing data that you've
25 seen for Niacor-SR as to the flushing data for Niaspan.

1 A. No, because there was never a comparison in the
2 same study, so you can't really compare I believe --
3 from what I know about Niaspan, it was given only once
4 a day, it was given at different times, usually at
5 bedtime, and unless you did a back-to-back comparison,
6 I don't think you could really learn anything by trying
7 to make that comparison.

8 Q. With that caveat in mind, if you were asked to
9 make that comparison, would you be able to reach any
10 conclusion?

11 A. No -- well, yes, you could probably reach a
12 conclusion that the two SR niacin products were better
13 than the immediate release, but as to the comparison,
14 no, I couldn't make any conclusion.

15 Q. Finally, for -- well, before I bring the slide
16 back up, you had underneath the Niacor-SR product
17 profile identified the efficacy profile and the side
18 effect profile. Underneath the side effect profile,
19 I'd like to turn your attention to the reduction of
20 liver enzyme elevations and ask you if you reached any
21 conclusions about that.

22 A. Well, the conclusion -- I'm not sure of your
23 question, but the conclusion I reached was that yes,
24 there are, as one would expect with a lipid-lowering
25 agent, there are certain -- a small percentage of

1 patients who have increase in liver functions.

2 Q. And again, I'm going to ask, did -- in reaching
3 this conclusion, was that based on the document
4 CX 1042?

5 A. Primarily, yes, um-hum.

6 Q. One second, I'll try to bring up that document
7 on the screen.

8 Dr. Horovitz, the document itself is at tab
9 CX 1042 in your binder, I believe it's the first
10 document.

11 A. Um-hum, yes.

12 Q. And I've put it up on the screen here. Is
13 that -- actually, it's not up here.

14 A. No, it's not.

15 Q. Here we go, I have it up on the screen.

16 A. That's the document, yes.

17 Q. And that's the document you're referring to?

18 A. Yes.

19 Q. And I've now put up on your screen a page from
20 that document. Is this the page that contains the data
21 you were referring to for your evaluation of the liver
22 enzyme elevations?

23 A. I believe so. I have a number 00092. Is
24 that --

25 Q. Yes, I believe that's right.

1 A. Yes, that's the same table.

2 Q. Now, could you explain what data you relied
3 upon in forming your conclusions?

4 A. Well, primarily the -- this chart in the very
5 right-hand column, which is 2 Successive -- and by
6 "notable," that's defined in the protocol as elevations
7 of liver function tests above three times the normal
8 range.

9 Q. And that's the criteria you identified earlier?

10 A. Yes.

11 Q. What -- for the doses in this slide or in this
12 document, what were the actual percentage of patients
13 at that level for each of the doses?

14 A. Well, that's shown on the right, the very right
15 column, zero percent for the immediate release product,
16 niacin; zero percent for the 1000 milligram study; 4
17 percent -- yes -- for the 1500 and the 2000 milligram
18 study -- group.

19 Q. Dr. Horovitz, and I apologize that I don't --
20 to make it easy I don't have it on the computer to
21 bring up, but are there any other data in this package
22 that are relevant to your consideration of the liver
23 enzyme elevations with Niacor-SR?

24 A. Yes, I think the other important -- one of the
25 other important aspects is to know if the patients who

1 did have elevated liver function tests had those
2 reversed once they stopped medication, and indeed, that
3 was the case. There is a table in this document that
4 shows I believe 40-some patients who were then tested
5 after the medication was stopped, and they all reversed
6 back to normal.

7 Q. And is that the page that I've put up on the
8 ELMO, SP 160093?

9 A. 93, correct, and I believe that's it, yes.
10 It's hard to read, but I believe that's it.

11 Q. Now, what is the significance of the reversal
12 of the liver enzyme elevations?

13 A. Well, it's very significant for the patient.
14 It means that he does not have any hepatotoxicity and
15 that his liver has given -- been given a chance to
16 recover.

17 Q. And returning again to the previous page, I can
18 actually bring that back, and you identified the 4
19 percent of patients at the 1500 and 2000 milligram dose
20 of Niacor-SR who experienced the successive elevations
21 of three times the upper limit of normal.

22 Is -- do you know how these elevations compare
23 to those that you had testified that you saw in the
24 McKenney study in the early 1990s?

25 A. Well, yes, the McKenney study had percentages

1 that were up above -- well above 50 percent, 60-70
2 percent.

3 Q. And how do the 4 percent elevations with
4 Niacor-SR compare to the elevations seen with other
5 cholesterol-lowering drugs?

6 A. It's in the ballpark. The statins -- there
7 are, of course, a number of statins, and every one of
8 them has had a percent of the patients in the studies
9 having three times the upper limit of normal liver
10 enzyme results. The percentage has varied depending on
11 the study and the drug, anywhere from less than 1 to 4
12 or 5 percent.

13 Q. And aside from the statins, how does the 4
14 percent with Niacor-SR compare to other
15 cholesterol-lowering drugs?

16 A. Well, the other significant one I think is the
17 fibrates, which is another class. There's a drug
18 called Tricor by Abbott Laboratories, benzofibrate, I
19 believe, that for most of the study -- for all of the
20 studies reports a number of approximately 5 percent for
21 successive liver enzyme values over three times the
22 upper limit of normal.

23 It also reports that if you only do single
24 values, that 13 percent of the patients show values
25 above three times the upper limit of normal.

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1 Q. Now, you identified a moment ago the data that
2 you relied upon to conclude that the elevations with
3 Niacor-SR were reversible. Was that consistent with
4 what was generally known about niacin itself?

5 A. I believe so. The literature -- the earlier
6 literature is hazy, but most of what I've seen in the
7 nineties, the studies indicated that if you take the
8 patient off medication if he has high liver enzymes,
9 off niacin, that it would reverse.

10 Q. And do you have an opinion one way or the other
11 as to whether the reversibility of liver enzymes was
12 known to be the case with other cholesterol-lowering
13 drugs, non-niacin cholesterol-lowering drugs?

14 A. Oh, yes, that's -- that's well known and, in
15 fact, the FDA certainly required that in the studies of
16 pravastatin that we did, required that we show that.

17 Q. Dr. Horovitz, in reaching your opinions -- and
18 you can put that document aside now.

19 In reaching your opinions regarding Niacor-SR,
20 did you reach any conclusions as to what would be the
21 ideal dose for marketing purposes?

22 A. Yes. If you look at the results of the study,
23 you find that the 1500 and 2000 are relatively close in
24 their efficacy, the 2000 a little more but not
25 significantly more, and the side effect profile is

1 obviously better with the 1500 than the 2000. So, I
2 would certainly have picked 1500 as the recommended
3 dose level for this product. And I believe that
4 Upsher-Smith probably came to that conclusion, because
5 they were -- they had protocols for doing studies at
6 the 1500 level.

7 Q. And what was the time frame of those protocols
8 that you just referred to?

9 A. I believe the protocols were available at the
10 same time the other two -- the results from the other
11 two studies were, in the June time frame.

12 Q. They were available to whom?

13 A. To Schering to look at.

14 Q. I direct your attention to your binder, the SPX
15 71 and SPX 72.

16 A. Okay.

17 Q. I'd ask you, Dr. Horovitz, are these the
18 protocols to which you were referring?

19 A. 71, correct, and 72, 1500, correct.

20 Q. Now, beginning with the SPX 71, could you
21 describe the -- this protocol, what this type of study
22 was?

23 A. Yes, it was a study to look at a combination of
24 Niacor-SR with fluvastatin and also to look at 500,
25 1000 and 1500 once-a-day treatment.

1 Q. And now directing your attention to SPX 72,
2 could you describe briefly what this study was designed
3 to testify?

4 A. Yes. Once again, it looked at titration up to
5 1500 milligrams of Niacor-SR once a day at bedtime and
6 compared it to a BID dose regimen.

7 Q. And let me pull it out, but a moment ago you
8 referred to this study -- excuse me, this protocol in
9 response to a question about the conclusion that the
10 1500 milligrams per day was the ideal dose.

11 Can you refer -- are you able to refer to -- in
12 that document to what you were relying upon for that?

13 A. Yes, in the -- this protocol number -- well, I
14 don't know that there is a number, but the --

15 Q. The page number at the bottom, it appears to be
16 cut off on that one page, but judging by the one before
17 it and the one after it, it's SPX 160015?

18 A. Well, first of all, it's SPX 72 we're talking
19 about.

20 Q. Oh, SPX 72.

21 A. Yeah, and if you go to the first, second --
22 third page.

23 Q. SP 160015?

24 A. Okay, I don't have that on mine, but in the
25 introduction to the protocol and the information to the

1 physician, there's a sentence that says, "The 1500
2 milligram per day dose seems to offer the best
3 combination of efficacy and tolerance."

4 Q. And again, this was a document that you
5 understand was provided to Schering in June of 1997?

6 A. Yes, I believe there is a date up top, 6/12/97,
7 that it was received, I guess.

8 Q. Now, referring in this same document back to
9 the second page in the entire document, Bates numbered
10 SP 160014?

11 A. Yes.

12 Q. Under Study Procedures, I'm going to try to put
13 it up on the screen here and see if I can --

14 A. 00114. It's 0011 --

15 Q. Oh, sorry, 0014, it should be the second page.
16 I know it's difficult, I should have had the staples
17 removed from these documents in the binder.

18 A. Let's see, yeah, mine says 00114.

19 Q. 114, I apologize.

20 A. Okay.

21 Q. And under where it says "Study Procedures," it
22 says, "The dosing schedules are as follows," and it
23 appears to have number 1, 2 and 3.

24 A. Yes.

25 Q. Can you explain what the significance of the 1,

1 2 and 3 is, what do those represent?

2 A. Well, they are different groups.

3 Q. So, they are different dosing schedules?

4 A. And different dosing schedules in each group,
5 correct, but the primary part of the study for 18 weeks
6 in two groups goes up to 1500 once a day, and the other
7 group goes up to 500 in the morning and 1000 in the
8 afternoon. So, it was 1500 broken up.

9 Q. Okay, that actually gets to my question. I see
10 here it says that, "All patients will be titrated to
11 1500 milligrams a day using one of three dosing
12 schedules."

13 A. Right.

14 Q. So, perhaps I didn't need to ask that last
15 question.

16 The -- I just have a question about what the
17 term "BID" and the term "QHS" mean.

18 A. BID is twice a day, in the morning and the p.m.
19 in that case, and QHS I believe is once a day at
20 bedtime.

21 Q. Okay, Dr. Horovitz. And, you know, before --
22 you don't have to open that back up, I had one other
23 question.

24 Referring now -- I'm going to put it on the
25 screen for you. It's that page that you had identified

1 before, "The 1500 milligram per day dose seems to offer
2 the best combination of efficacy and tolerance."

3 A. Correct.

4 Q. I'm going to ask you -- it actually goes over
5 onto the next page saying, "There may be some benefit
6 in once a day bedtime dosing since this correlates with
7 cholesterol production in the liver. The optimal
8 dosing schedule of Niacor-SR has yet to be defined."

9 A. Right.

10 Q. And I'll ask you, what does that communicate to
11 you in terms of the purpose of this study, if any?

12 A. Well, the purpose was to show, I think, that
13 once a day would be good therapy, good efficacy and
14 safety, and also to look at bedtime dosing, which a lot
15 of people feel is the way you should give
16 cholesterol-lowering agents, because the cholesterol
17 turnover is much more active when you're sleeping at
18 night. So, you want medication there.

19 Q. So, it would be comparing two things; it would
20 be comparing the -- not only the once-a-day dosing but
21 also the nighttime dosing?

22 A. Yes, and it would justify to the FDA that you
23 could take it only once a day.

24 Q. This time I actually am done with that
25 document.

1 JUDGE CHAPPELL: Does anyone else notice the
2 Arctic air that's blowing in here? I've asked someone
3 to check on it. We may be bundling up before the day
4 is over. We go from sweltering heat to Arctic air.

5 THE WITNESS: I live in Florida, Your Honor, so
6 I feel it.

7 JUDGE CHAPPELL: But you have been in
8 Pittsburgh.

9 THE WITNESS: A long time ago.

10 BY MR. RAOFIELD:

11 Q. Now, Dr. Horovitz -- well, I don't need to
12 bring that up anyway.

13 Having now reviewed the product profile for
14 Niacor-SR and the efficacy profile and side effect
15 profile, have you reached any conclusions about whether
16 Niacor-SR met the product opportunity that you
17 testified existed for an SR niacin in June of 1997?

18 A. Yes.

19 Q. And what did you conclude?

20 A. I concluded that the data supported that it was
21 a safe and efficacious drug that certainly could be
22 registered and sold if the selling was correct to
23 justify the projections that were made.

24 MR. RAOFIELD: Your Honor, at this time I'm at
25 a good breaking point. I, of course, can continue on,

1 but if we were going to take a morning break, I just
2 wanted to offer this as a possible point.

3 JUDGE CHAPPELL: Yes, let's go ahead and take a
4 break. It's 11:00. We will recess until 11:15.
5 Everyone try to warm up.

6 (A brief recess was taken.)

7 JUDGE CHAPPELL: Back on the record.

8 They are adjusting the heat, so we should be
9 thawing out slowly but surely. What will probably
10 happen, it will be 110 in here, so we will have to turn
11 it back.

12 You may proceed.

13 MR. RAOFIELD: Thank you, Your Honor.

14 BY MR. RAOFIELD:

15 Q. Dr. Horovitz, bringing back up the slide that
16 you had for part two of your analysis and moving now to
17 the next bullet point, "Strategic Value Niacor-SR
18 Presented to Schering," could you explain what that's
19 in reference to?

20 A. Yes. Any deal probably has some strategic
21 value to the person or both parties doing the deal, and
22 it's always important to look at strategic value,
23 because it tells you what besides just numbers are
24 important in doing that deal.

25 In this case, I believe I said before that in

1 the mid-nineties, the cholesterol market was just
2 taking off, and all the major pharmaceutical companies
3 were looking at it. If they weren't in this market,
4 they wanted to be in this market. And specifically for
5 Schering, it became important because they had a drug
6 in their pipeline called ezetimibe, which was a novel
7 kind of mechanism for lowering cholesterol, and they
8 really didn't have much at that time in the
9 mid-nineties in the field.

10 So, they had no corporate experience is the
11 word I used. They really didn't know much about this
12 field at that time, and it was -- it was important for
13 them to try to get to learn, and one of the best ways
14 to learn is to get a product to sell so that your
15 company from the top down learns about this field,
16 learns how to sell in this field.

17 And indeed, I think that was one of the reasons
18 they looked at Kos' Niaspan before they started looking
19 at Niacor.

20 Q. Do you recall when Schering was engaged in a
21 valuation of Kos' Niaspan product?

22 A. I believe in the early part of '97.

23 Q. Now, Niacor and Niaspan are both sustained
24 release niacin products, correct?

25 A. Correct.

1 Q. Have you seen any evidence that would lead you
2 to conclude that Schering, as you say, had concluded
3 that sustained release niacin could be used to -- for
4 this strategic purpose?

5 A. Well, the evidence is that they obviously were
6 interested in both products. First Niaspan was
7 presented to them, and they looked at it, and then
8 later Niacor. So, they obviously felt that a sustained
9 release niacin was a product they'd want to look at.

10 Q. With respect to Niaspan, referring your
11 attention to SPX 21 in your binder -- and what's the
12 date of this document?

13 A. March 26th, 1997.

14 Q. And is this one of the documents that you
15 reviewed in relation to Niaspan, Schering's evaluation
16 of Niaspan?

17 A. Yes, I've seen it.

18 Q. Could you identify in this document what
19 supports your conclusion that Schering viewed Niaspan
20 as offering the strategic value you identified?

21 A. Well, a Mr. Russo from Schering is sending this
22 to other people at Schering, and he makes a couple of
23 points on the middle of the first page, number -- the
24 second number 1, "Schering-Plough/Key would need
25 guarantees on active participation and input into

1 promotional and strategic efforts for the brand." He's
2 saying they want to participate in the marketing at
3 least.

4 He then goes on to say, "This is essential to
5 obtain the early strategic leverage and market
6 expertise that would allow us to strategically bridge
7 to our own 58235 compound," which was ezetimibe. And
8 so he's saying there what I said, that he believed it
9 was important for the company to be involved in this
10 therapeutic area.

11 Q. And the language that you've identified, is
12 that the language that I've just put up on the screen?

13 A. Yes, the -- you have highlighted part of that
14 number 1, yes.

15 Q. Now, the date of this document was March 26th,
16 1997. Do you know when Schering began its evaluation
17 of Niacor-SR in terms of was it before or after or
18 during the same time period?

19 A. It was after.

20 Q. After this. And can you just explain how the
21 language that you've identified in this document with
22 respect to Niaspan supports your conclusion that
23 Schering thought that a sustained release niacin
24 product would offer some strategic value?

25 A. Yes, obviously they felt -- they knew that this

1 was a product for the hyperlipidemic area to lower
2 cholesterol, and they would be selling to the same
3 kinds of people. They would be learning about the
4 therapeutic area, putting together promotional
5 documents and things like that around this therapeutic
6 area, and I'm sure felt that the potential of
7 combination therapy later on with ezetimibe or the
8 statins would be something that this would give them a
9 chance to look at.

10 Q. Now, turning from Niaspan to Niacor-SR, have
11 you seen any evidence that supports your conclusion
12 that Schering thought that Niacor-SR could also offer
13 this strategic value that you've identified?

14 A. Yes, I believe so.

15 Q. I'm going to direct your attention now to a
16 document in your binder marked SPX 235. This is a
17 document entitled Niacor-SR Supplemental Information
18 with the date June 23, 1997, correct?

19 A. Correct.

20 Q. Now, Dr. Horovitz, do you know what date the
21 Schering board of directors approved the Niacor-SR
22 deal?

23 A. It was the latter part of June, I believe the
24 24th-25th.

25 Q. So, this document is dated before the Schering

1 board of directors approved the Niacor-SR deal?

2 A. If it was the 24th or 25th, yes.

3 Q. And is there any information in this document
4 that supports your conclusion that Schering believed
5 that Niacor-SR offered the strategic value that you
6 identified?

7 A. Well, there's a note added to the last page I
8 guess of the document or next to last, and it -- on the
9 bottom of that page, 00003, it says, "Niacin SR will
10 provide experience with the anti-cholesterol market and
11 a complimentary product (along with the
12 cholestyramine)," which also was one of the products in
13 the Upsher-Smith deal, "when our ACAT cholesterol
14 inhibitor in Research comes to market."

15 Now, I am assuming they're referring to
16 ezetimibe, because early on ezetimibe was thought to be
17 an ACAT inhibitor, and they probably didn't have
18 another generic name at that time, but that's
19 essentially saying that strategically, they wanted to
20 get into this market to help them in the future market.

21 Q. And Dr. Horovitz, how did the strategic value
22 that Schering identified in June of 1997 for Niacor-SR
23 and cholestyramine relate to your opinions in this
24 case?

25 A. Well, it related to my opinion that there was

1 value for Schering to doing this deal, and besides
2 economic value, there was certainly strategic value to
3 get them into this marketplace early on.

4 Q. And in your opinion in the pharmaceutical
5 industry, is a strategic value a consideration when
6 entering into a licensing transaction for a
7 pharmaceutical product?

8 A. Absolutely, especially if a company feels that
9 they have what we call in the industry a blockbuster or
10 a large selling drug coming out of their research in
11 the near future. They want to begin as early as
12 possible to learn the market and hopefully to be able
13 to sell other products in that marketplace.

14 Q. And the description that you just gave where
15 you said a potential blockbuster, is that something
16 that you would find applicable to this situation with
17 Niacor-SR?

18 A. Well, I'm not sure you could classify Niacor-SR
19 as a potential blockbuster, but I believe at that time
20 Schering thought that in their research pipeline they
21 had a potential blockbuster, and from what I know of
22 that compound, where it is today, they probably still
23 think so.

24 Q. And the strategic value that they identified
25 with Niacor-SR related to the ezetimibe project?

1 A. I believe so, yes.

2 Q. Dr. Horovitz, the -- I've put back up on the
3 screen the slide that you prepared for your part two
4 analysis, and the final bullet point is -- relates to
5 the evaluation of Schering's assessment of Niacor-SR
6 and the assumptions to that assessment. Is that
7 correct?

8 A. Yes.

9 Q. And I'd like to direct your attention to a
10 document in your binder, SPX 2. Do you recognize this
11 document?

12 A. Yes.

13 Q. And what is it?

14 A. It's a memo from a Mr. Lauda to a Mr. Kapur at
15 Schering passing on a -- what he calls a commercial
16 assessment for niacin that was prepared by Mr.
17 Audibert.

18 Q. I'd like to direct your attention to the last
19 page of that document, Bates numbered SP 1600047.

20 A. Yes, I have it.

21 Q. Dr. Horovitz, can you describe generally what
22 this page represents?

23 A. Well, it's an attached table to the commercial
24 assessment that lays out their -- the estimates for
25 sales and market share and then has assumptions or

1 rationale for how I guess Mr. Audibert got those
2 numbers.

3 Q. And are those the assumptions that you said
4 that you identified to determine the reasonableness of
5 the --

6 A. Right, to check on the validity of the number.

7 Q. Beginning with the first assumption, it says,
8 "Dossiers --" and tell me if you don't see where I'm
9 referring.

10 A. Yeah, I'm with you.

11 Q. It says -- let me try to zoom in a little bit
12 more on that.

13 It says, "Dossiers approved late 1998."

14 A. Yes.

15 Q. What opinions, if any, did you reach as to the
16 reasonableness of that assumption?

17 A. Well, considering that the pivotal trials were
18 finished at the time that Mr. Audibert did this in June
19 of '97 and considering that for the most part, in most
20 ex-NAFTA countries, which was the territory Schering
21 had, they would just have to take the integrated
22 summaries from those trials and send them over to the
23 regulatory bodies overseas, then that was probably a
24 reasonable assumption if they got those out in the end
25 of '97, that they could have approval certainly in some

1 countries in '98, the end of '98.

2 Q. And I can put it up on the screen if you'd
3 like. I'm going to refer now to -- you just made a
4 comment about depending on when they were going to get
5 from Upsher-Smith the materials that they needed.

6 A. Right.

7 Q. I'm referring to CX 1042, which is the package
8 you identified as containing slides about Niacor-SR
9 that was provided to Schering.

10 A. Right.

11 Q. And I can put it up on the screen if you can
12 see it there.

13 A. Um-hum.

14 Q. It's SP -- the page number is SP 1600079 for
15 the record.

16 In your last answer, you said that the
17 assumption that the dossiers would be approved in 1998
18 was reasonable if they were expecting to receive the
19 materials they needed by the end of -- the latter part
20 of 1997. Is that correct?

21 A. Yes.

22 Q. And does this slide provide any information
23 that supports that assumption?

24 A. Well, this slide indicates that I guess
25 Upsher-Smith was telling Schering in June of '97 that

1 they would have the final integrated safety and
2 efficacy summary, ISS and ISE they're calling it, the
3 final report in October of '97, which would give
4 Schering the ability to transmit that report, anything
5 else that they may want to add to it, to the regulatory
6 bodies overseas and by the end of '97, yeah.

7 Q. Turning now to the assumptions, the next
8 assumption says, "Reimbursed in most major markets."

9 A. Um-hum.

10 Q. What opinion did you reach, if any, as to the
11 reasonableness of that assumption?

12 A. I felt that that was probably a valid
13 assumption, especially when I looked at the pricing
14 issue, which is three down, the product priced
15 approximately 50 percent to atorvastatin. I think most
16 of the overseas markets were looking for cheaper drugs
17 for treating high lipids and would have agreed that a
18 price at 50 percent of the statins would be reasonable
19 and they would support reimbursement.

20 Q. And directing your attention to the third
21 assumption, it reads, "Niacor-SR is the only SR niacin
22 approved for hypercholesterolemia -- both as
23 monotherapy and in combination with statin," and I'd
24 like in this question to ask you specifically first
25 with respect to the part of that assumption that is

1 that Niacor-SR would be approved for
2 hypercholesterolemia, both as monotherapy and in
3 combination with statin.

4 What opinions did you reach, if any, as to the
5 reasonableness of that assumption?

6 A. Well, I believe that the pivotal trials,
7 efficacy and safety supported it being approved for
8 hypercholesterolemia as monotherapy. There were some
9 combination studies with a statin anticipated and there
10 was some data, but that may have taken the completion
11 of that other protocol before they would get that
12 labeling and approval. So, that may have come a little
13 later.

14 However, my guess is that if this product got
15 approved, many physicians would start using it in
16 combination anyway. That was the practice in their
17 hard-to-treat patients to get cholesterol levels down
18 to where they want, they probably would have used a
19 combination therapy.

20 Q. Now, the first part that I removed from that
21 assumption, I believe it relates to the next bullet
22 point, but you can bring us back to it if you'd like.
23 The next bullet point is, "Similar products with
24 similar labeling enter the market in late 2002."

25 My question is whether you reached any

1 conclusions as to the reasonableness of that
2 assumption.

3 A. Yes, I think Mr. Audibert was probably
4 anticipating that there would be SR niacin products
5 eventually, because Schering would not have
6 exclusivity, and that the best guess, his best guess of
7 when they would enter the market would be late of '02,
8 and I think he adjusted his -- can you go down a little
9 bit?

10 Q. Yes.

11 A. -- his sales figures -- well, you can see it in
12 market share, too. The market share would decrease
13 some and the sales would decrease some as some
14 competition started to come in.

15 Now, you know, that's -- I think he's being
16 very conservative. A lot of times when you get
17 competition, your sales -- your market share may go
18 down a little bit, your sales may go up, because you
19 find more interest in the drug, but he's being very
20 conservative.

21 Q. Could you explain that last answer, how entry
22 from a competitor can actually lead to increased sales
23 in the market?

24 A. Well, it's a phenomena that happens, and the
25 best explanation I have is that it's awareness, that

1 you now have two companies promoting similar products,
2 and the physician gets more aware of the whole idea of
3 an SR niacin, and -- in this case, and the experience
4 shows that a lot of times when the second drug comes
5 in, the market for the first one doesn't go down, it
6 actually can go up.

7 Q. And I don't want to leave any loose ends, so I
8 just want to go back and ask you if your answer to that
9 one takes care of the part of the prior bullet that I
10 left out, "Niacor-SR is the only SR niacin approved for
11 hypercholesterolemia."

12 A. Well, yes, I guess I'm agreeing with his
13 assumption that he would have exclusivity for a few
14 years, but eventually, you know, there would be
15 competition.

16 Q. And the next assumption is, "Product priced
17 approximately 50% to --" actually, you know, before I
18 go on to that next assumption, let me return to the
19 assumption that competition would enter the market in
20 late 2002.

21 You've testified that you're familiar with the
22 product Niaspan?

23 A. Yes.

24 Q. And what was your understanding as of June '97
25 of the stage and development of that product?

1 A. It was filed, I believe, with the FDA and they
2 were waiting for response for approval of their NDA.

3 Q. And are you familiar with Dr. Levy's opinion in
4 this case that Niaspan's existence as a competitor at
5 that point makes this assumption unreasonable?

6 A. Yes, I believe he commented on that.

7 Q. And do you agree with Dr. Levy's opinion on
8 that point?

9 A. Well, there was -- there was documentation I
10 saw in the discussions that Schering had with Kos that
11 they certainly at that time weren't developing it in
12 ex-U.S., and I know there was -- I believe it was Mr.
13 Audibert's deposition where there were comments that he
14 felt, because of his contacts with Kos, he being a
15 former Key employee and a lot of the Kos people being
16 former Key employees, that they didn't have any
17 near-term interest in the overseas markets. They
18 wanted to establish the product in the U.S. first.

19 So, yes, Kos could eventually have brought
20 Niaspan SR as a competitor in the overseas markets,
21 although I don't believe that's ever happened.

22 Q. The next assumption is, "Product priced
23 approximately 50% to atorvastatin."

24 I believe you answered that one in connection
25 with your answer on reimbursed in most major markets,

1 but if you need to add anything, I want to give you the
2 chance to do that.

3 A. No, I'll just say again that I think the
4 success of getting reimbursement for a niacin SR will
5 depend on the pricing and the pricing significantly
6 below the high-priced compounds, like the statins.

7 Q. The next bullet point is, "Side-effect profile
8 of Niacor-SR doesn't significantly change."

9 Have you reached any opinion as to the
10 reasonableness of that assumption?

11 A. Well, that's -- that's an assumption he's
12 making to protect himself. Obviously if the side
13 effect profile changes to the negative, then he can't
14 stand behind those numbers, but based on the side
15 effect profile from the data he saw in June and I saw
16 that he saw in June, I would say that he has -- that
17 they support his numbers.

18 Q. And the final bullet point listed here is,
19 "Sales and market are worldwide (except the U.S.,
20 Canada, Mexico)."

21 A. Yes, he's just defining the rationale for his
22 numbers as being in those markets that Schering has
23 rights to under the agreement.

24 Q. Now, does this page indicate the percent market
25 share that Mr. Audibert was projecting for Niacor-SR?

1 A. Yes, that's the second column going down.

2 Q. And what does it indicate?

3 A. He's projecting a market share starting at
4 about 0.75 percent and going up to 1 and a half
5 percent, which I felt was very small and reasonable for
6 a Niaspan -- for a Niacor -- a niacin SR product.

7 Q. And is that last answer based on your review of
8 the information with respect to Niacor-SR in this case?

9 A. Yes.

10 Q. This document is -- you've testified is the --
11 what you reviewed for the -- to evaluate the
12 assumptions -- the reasonableness of the assumptions
13 and the sales projections, correct?

14 A. This and everything else I reviewed went into
15 that, yes.

16 Q. Did you reach any opinion as to the
17 reasonableness of the document as a whole or as to the
18 sales projections and the assumptions?

19 A. Yes, I concluded that his assumptions were
20 reasonable and suitably conservative for evaluating the
21 product.

22 Q. Dr. Horovitz, at the time that you were forming
23 your opinions in part two of your analysis, did you
24 consider performing a comparison of the level of due
25 diligence that Schering performed in other deals to the

1 level of due diligence performed in Niacor-SR?

2 A. No.

3 Q. And you testified that you were retained in
4 this case to -- in part to respond to Dr. Levy's expert
5 report. Is that correct?

6 A. That's correct.

7 Q. Do you recall whether Dr. Levy's report
8 addressed the issue of a comparison of the level of due
9 diligence in other Schering deals to the level of due
10 diligence with Niacor?

11 A. I believe he did mention that, yes.

12 Q. And I'm referring specifically now to the due
13 diligence as opposed to the other part, which we'll
14 address later, a comparison of other deals, in terms of
15 the payments.

16 A. Yes, he mentioned that he thought the due
17 diligence -- and I don't remember his exact words --
18 was small or something like that.

19 Q. And let me back up and clarify my question, if
20 I could.

21 I'm referring not just to the level of due
22 diligence performed with respect to Niacor-SR; I'm
23 asking you whether you saw Dr. Levy in his report make
24 reference to a comparison of that specifically to the
25 level of due diligence performed in other Schering

1 deals.

2 A. I can't remember the exact words. I know he
3 made comments on the due diligence, and he -- of
4 course, he made other comparisons to other Schering
5 deals.

6 Q. And what were those other comparisons, what
7 subject did they relate to?

8 A. Mostly to noncontingent payments.

9 Q. Have you had a chance to review Dr. Levy's
10 trial testimony in this case?

11 A. Yes.

12 Q. And do you recall whether Dr. Levy addressed --
13 and again, specific to due diligence and specific to a
14 comparison of the due diligence in other Schering deals
15 -- to the due diligence in Niacor-SR?

16 A. In his deposition or trial?

17 Q. In his trial testimony.

18 A. In his trial, yes, he did. He spent a lot of
19 time on it.

20 Q. Have you now reviewed the materials relied upon
21 by Dr. Levy in his testimony, his trial testimony?

22 A. No, not -- I haven't had time to look at
23 everything he claims he looked at.

24 Q. Now, without having reviewed those materials,
25 are you able to offer any opinion in response to Dr.

1 Levy's trial testimony on that point?

2 A. Well, I think that comparison is not -- and
3 I'll try to be nice and say it's not useful. I don't
4 see how you can compare due diligence from one deal to
5 another. I mean, due diligence should be defined as
6 doing the diligence that is due for that specific
7 agreement, and it's going to vary depending on every
8 deal. So, I don't know how you can relate time or
9 boxes of material from one deal to the other. I think
10 it's an exercise that does not tell you very much.

11 Q. You referred to considerations that varied from
12 deal to deal. Could you give us an example of a few
13 types of what considerations might influence the level
14 of due diligence that you -- that a person evaluating a
15 pharmaceutical product might perform?

16 A. Well, it depends on a number of things. First
17 of all, how much information is available, the
18 expertise of the person or persons doing the due
19 diligence, the state of the product in development,
20 whether it's a new chemical entity or an old drug. A
21 new chemical entity is going to require much more
22 diligence than a drug that's been around for 20-30
23 years and just is a simple reformulation. So, those
24 are all factors that you have to take into
25 consideration.

1 Q. If we could take the -- your reference to the
2 information that was already available to the company,
3 how might a company's preexisting familiarity with a
4 product or a market relate to the level of due
5 diligence that it would perform in evaluating a
6 product?

7 A. Well, I think it certainly would help and make
8 the process go a lot faster if the reviewer has a
9 knowledge of the product and has background into the
10 product. And in fact, in this case, Mr. Audibert I
11 guess, in seeing a lot of the documentation that Kos
12 provided, had a lot of background into this area of
13 controlled release niacin. So, that would allow him to
14 do a much faster review than if he was starting from
15 scratch.

16 If it was a new chemical entity, he or anyone
17 doing the due diligence would have to do a lot more
18 reading and talking to experts and things like that,
19 because there wasn't as much familiarity with a new
20 chemical entity as there would be with an old drug.

21 Q. Okay, with respect to Mr. Audibert and the --
22 what you identified as the preexisting familiarity with
23 the product or the market, have you seen any evidence
24 that Mr. Audibert had information that would enable him
25 to perform this type of evaluation as you've described?

1 A. Well, first of all, he -- his experience -- I
2 mean, he has a biology background and his experience in
3 the industry a lot of the time was with controlled
4 release, sustained release products. In fact, he came
5 from Key, which was one of the early developers of that
6 technology.

7 And second of all, he certainly saw some of the
8 documents I saw that Kos presented about the background
9 of the market and the area. And -- oh, and third, he
10 had -- my understanding is from what I read, he had
11 been involved in the planning, the market planning, for
12 ezetimibe and had spent most of the first part of '97
13 looking at the market and talking to country managers
14 about the cholesterol market. So, he had a lot of that
15 background, too.

16 Q. And how does that relate to your opinion?

17 A. Well, it says that he could get up to speed and
18 do a diligence analysis much faster than probably most
19 people could at that time.

20 Q. Now, another consideration you identified was
21 whether a drug was a new chemical entity as opposed to
22 a known drug.

23 A. Um-hum.

24 Q. And how would that relate to the level of due
25 diligence that you might perform in evaluating a

1 pharmaceutical licensing opportunity?

2 A. Well, with a known drug, you have -- you have a
3 lot of the clinical experience and experience in all
4 areas, and you know what to expect, and if the data
5 that you see on the old drug is what you expect, then
6 you feel confident you can do a proper analysis.

7 In a new chemical entity, biology can surprise
8 you. You never really know until you get detailed
9 data, until you understand the mechanism, until you get
10 extensive clinical or preclinical data, so it takes you
11 a lot longer to do diligence, and you're never quite
12 assured, as you would be with an older product.

13 Q. And how does that last answer relate to
14 Niacor-SR and the evaluation of Niacor-SR?

15 A. Well, obviously Niacor-SR was a known
16 pharmacological agent, niacin, with just a controlled
17 release formulation, and as I said, it would be a lot
18 easier and you would be more confident in looking at
19 the data and analyzing it than you would with a new
20 chemical entity.

21 Q. And the other -- I don't know if I picked up on
22 all of them, but the other one that I think that you
23 identified as consideration was the stage a drug is in
24 development. How might that relate to the level of due
25 diligence one would perform when evaluating a

1 pharmaceutical licensing opportunity?

2 A. Well, that's a mixture. I mean, if it's an
3 earlier stage development, you don't have as much data
4 from the clinic -- preclinical data to look at, maybe
5 some earlier clinical, but you have to be much more
6 cautious about those data, because just like I said
7 before, it's an -- it's more of an unknown, and you
8 have to think it through more. I would in early stage
9 products probably look to experts much more than I
10 would on a compound that I've known for years and is
11 late stage.

12 Q. And what stage in development was Niacor-SR?

13 A. It was very late stage, had completed the
14 pivotal studies in phase III and was near filing.

15 Q. And how does that relate to your discussion of
16 the level of due diligence varying from deal to deal?

17 A. Well, I think in that case a knowledgeable
18 person could do the due diligence reasonably quickly
19 compared to other deals.

20 Q. With respect to all of these various
21 considerations, how does that relate to what you
22 testified was your disagreement with Dr. Levy's method
23 of comparing the due diligence performed in some
24 Schering deals as to the level of due diligence
25 performed with Niacor-SR?

1 A. Well, I believe in his testimony, he used a
2 couple criteria. One was the time that the deal took
3 from start to finish, and the other was the weight of
4 the documentation, and I don't think either of those
5 are proper comparisons.

6 Q. Dr. Horovitz, during your career in the
7 pharmaceutical industry, can you think of an example of
8 a licensing evaluation which supports your conclusion
9 that the level of due diligence varies from deal to
10 deal?

11 A. Well, I guess every one, every one I've ever
12 been involved in would indicate that there's
13 variability, because there is variability. I mean, I
14 can -- I can think of one that I did with a French
15 company for two new agents, and we -- the up-front
16 there was giving them drugs, and we looked at their
17 drugs, they looked at ours. That negotiation went on
18 for about nine-ten months. The final agreements were
19 like six big volumes like those up there.

20 And then I can think of one that I did with a
21 Japanese company that occurred like in a week without
22 us getting a lot of information, because strategically,
23 the company wanted to get into the antiviral area.
24 This company in Japan had -- it was not a
25 pharmaceutical company, but -- they were a fermentation

1 company, but they had discovered a very potent
2 antiviral, at least in animal data, and we had other
3 people who were, you know, trying to get that compound,
4 and even though I wanted to see more studies in our
5 labs of their product, they wanted to sign a deal, and
6 the president of our pharmaceutical division said
7 strategically, you know, we want that product, and do
8 the deal.

9 JUDGE CHAPPELL: Sir?

10 THE WITNESS: I'm sorry?

11 JUDGE CHAPPELL: I need you to remove your hand
12 from your mouth and speak up, especially at the end of
13 your answers. The court reporter's having trouble
14 hearing you.

15 BY MR. RAOFIELD:

16 Q. Dr. Horovitz, at the time that you were forming
17 your opinion in part two of your analysis, did you
18 perform a comparison -- and I'm changing the question
19 slightly now -- did you perform a comparison of the
20 amount and the type of the payments in other Schering
21 deals to the type and the amount of payments in the
22 Niacor-SR deal?

23 A. In my report?

24 Q. In forming your opinions at all.

25 A. No, not really.

1 Q. Do you recall whether Dr. Levy performed those
2 types of comparisons in his expert report?

3 A. I believe so. There were a couple tables he
4 developed in the back of his report and a couple
5 paragraphs where he talked about other deals that
6 Schering had done.

7 Q. Now, you testified that you were retained in
8 part to respond to Dr. Levy's report, and you just
9 testified now that you did not perform those types of
10 comparisons. Can you explain?

11 A. Well, I believe in my report I indicated that,
12 once again, I thought that those kinds of comparisons
13 were not valuable, that they were apples and orange
14 comparisons, and that you -- it's very difficult to
15 find any deal that's the same for comparison, meaning
16 it -- the drug is in the same stage, the therapeutic
17 area might be the same, the interests of the parties
18 are the same, because all those things go into a
19 negotiation, and so you can't compare what was finally
20 negotiated in one deal with another unless you have all
21 those similarities, and I don't think I've ever seen a
22 deal that's exactly the same as a second deal.

23 Q. Now, have you had the opportunity -- I think
24 you said you have -- to review Dr. Levy's trial
25 testimony in this case?

1 A. Correct.

2 Q. And do you recall whether he offered any
3 opinions in his testimony here in trial which compared
4 the amounts and types of payments that Schering made in
5 other licensing deals to the amounts and types of
6 payments with Niacor-SR?

7 A. I believe what I remember is he compared the
8 Upsher-Smith deal with a number of other deals that
9 Schering did just looking at what he defined as
10 contingent -- noncontingent payments. I think that's
11 correct.

12 Q. Now, have you gone back and reviewed the
13 materials that Dr. Levy relied upon in his testimony?

14 A. No, I have not had the time to look at all
15 those documents since his testimony.

16 Q. Do you recall any testimony of Dr. Levy --
17 well, let me back up.

18 Do you recall any testimony that Dr. Levy
19 offered which related to his consideration or
20 nonconsideration of the amount of research and
21 development costs that Schering anticipated at the time
22 of any of those other deals?

23 A. Yes.

24 Q. And what do you recall Dr. Levy's opinion was
25 on that topic?

1 A. Well, Dr. Levy discounted any expenditure for
2 internal R&D in the determination of what he called
3 noncontingent payments, and I think that's completely
4 wrong.

5 Q. Could you explain that?

6 A. Sure, there's a number of points. When you --
7 when you commit dollars in an agreement to doing R&D,
8 that's a commitment for a budget, and that money can't
9 be used for anything else. Now, it should be clear
10 obviously that when you commit a certain amount of
11 money for R&D and something happens, maybe that the
12 drug dies, you may not spend that total amount, that's
13 correct. But there's certainly -- when you start a
14 study, when you start development of a drug, you commit
15 dollars, and a lot of it is spent. Some of it even if
16 the drug dies you would still spend, because you have
17 to complete studies and report them to the FDA.

18 Secondly, I don't know if Dr. Levy understands
19 that for most deals, the up-front payment is an R&D
20 expense. It comes out of the R&D budget. Most
21 companies I've ever dealt with, my own and at Bristol
22 and Squibb and all the companies I've been working with
23 since, if they're going to do a deal for a new product,
24 the money -- the up-front money comes out of the hide
25 of the R&D people, and the reason for that is that it's

1 an opportunity cost.

2 If they're going to spend money on this outside
3 product to get it in, then they're going to do less
4 internally in R&D, and -- except for maybe special
5 circumstances where they could get it out of a
6 different budget if it's a -- you know, a product
7 that's already in the market, it usually comes from
8 R&D.

9 So, you have to calculate that a good portion
10 of any R&D commitment is going to be a noncontingent
11 spending, and it's going to come from R&D.

12 Q. Dr. Horovitz, during your career in the
13 pharmaceutical industry, were you ever involved with
14 the in-licensing of a cholesterol-lowering drug?

15 A. Yes.

16 Q. And what drug was that?

17 A. That was a drug called pravastatin or the trade
18 name of Pravachol, which Squibb licensed from a company
19 in Japan called Sankyo in the mid-1980s.

20 Q. The mid-1980s.

21 A. And it was the second statin to be discovered.

22 Q. Could you just -- and I know it was 15 years
23 ago -- but could you just describe the negotiations
24 that took place in that deal?

25 A. Yes. We wanted the drug for sales and

1 marketing in the rest of the world except the Japan
2 territory. Sankyo did not have the ability to sell it
3 outside the Japan territories, so they were willing to
4 discuss licensing it to Squibb.

5 Q. And did you during any portion of those
6 negotiations visit their facilities in Japan?

7 A. Oh, yes, many times.

8 Q. And could you describe the negotiations that
9 took place while you were there?

10 A. Well, I don't really remember anything much in
11 detail except that we thought we had a deal on a
12 Friday, shook hands, I went home. The business
13 licensing person stayed, and on Monday morning, the
14 National Institutes of Health released the results of a
15 long-term study on the benefits of lowering cholesterol
16 for treating heart disease, and Sankyo came back and
17 said, wait a minute, this makes this drug even much
18 more important, and we have to renegotiate the deal.

19 We had a quick meeting in Princeton with the
20 president of the company and decided that actually they
21 were right, and even though we tried to resist
22 negotiating the deal, we had to, and we did renegotiate
23 the deal.

24 Q. And did you go back and recalculate the values
25 and do further work?

1 A. Actually, at the meeting, our decision was
2 pretty clear. We were going to do it even without the
3 calculations. We did the calculations later on, but --
4 and they supported that this was a deal we wanted and
5 should go ahead with.

6 Q. And again, I understand that it was 15 years
7 ago, but do you remember generally the terms in terms
8 of the payments of the deal?

9 A. It's tough to go back. I may have mentioned
10 something in my deposition that I thought it was around
11 the \$50 million range, but -- for up front. It may
12 have been somewhat lower than that, I just can't
13 remember. I can't even find anyone who's left at
14 Squibb who would remember the actual details, but there
15 was an up-front payment, and the deal was -- and this
16 is an important fact -- the deal was primarily -- we
17 would buy the material from Sankyo, they would produce
18 it, and they would pay them -- they would guarantee us
19 a margin, let's say 60 percent.

20 So, they would get 40 percent of the revenues,
21 we would get 60. In that 40 percent obviously was
22 their cost of goods plus a large royalty, but it was
23 not -- not spoken of as a royalty but as a margin deal.
24 And of course, most pharmaceutical companies would like
25 a bigger margin than just 60 percent, but that's the

1 deal they structured.

2 Q. Now, do you recall -- at the time of the deal,
3 do you recall what the anticipated research and
4 development expenses Squibb anticipated?

5 A. Yes, we would have to do all the work
6 essentially to develop this product to an NDA. They
7 were in phase III in Japan, but most of the Japanese
8 data would not help us with the FDA and most European
9 regulatory bodies. I believe we anticipated in the
10 range of \$50 to \$100 million to develop the drug. I
11 think it really cost us more like \$200 million, but it
12 paid off, because this was a billion dollar drug.

13 Q. Do you recall in your review of Dr. Levy's
14 trial testimony whether he discussed his consideration
15 or nonconsideration of equity investments when making
16 his comparison of the Niacor-SR deal to other Schering
17 deals?

18 A. Yes.

19 Q. And what do you recall about his opinion?

20 A. Well, he felt that in general equity
21 investments shouldn't be called noncontingent, and I
22 believe his reasoning was that you could get a return.
23 Occasionally companies do make equity investments, and
24 then the company they invested in, the stock goes up,
25 and they get a return on that money. In most cases,

1 that doesn't happen.

2 My former company just learned that. Bristol
3 did a deal with ImClone for -- which I am sorry about,
4 but I didn't do it -- Bristol did a deal with ImClone
5 where they bought equity for a billion dollars, and six
6 months later, they're writing off three-quarters of
7 that. But it certainly is true that these investments
8 could gain in the years.

9 Actually, though, the accountants and the CFOs
10 at most companies, though, will not let you amortize
11 very long. They like to write those investments off
12 very quickly, sometimes the first year, sometimes two
13 or three years, and I -- and they justify that because
14 the experience has been that most of these deals, the
15 equity investment does not pay back.

16 Q. Now, you mentioned the ImClone deal and I
17 believe you mentioned that the equity investment in
18 that deal was a billion dollars and roughly
19 three-quarters of that was written off. Putting aside
20 the equity investment involved in that deal, are you
21 familiar with the up-front payment, the up-front cash
22 payment involved in that deal?

23 A. Yes, the -- the noncontingent up-front payment
24 was \$200 million. There were other milestone payments
25 after that, but the up-front noncontingent was \$200

1 million.

2 Q. Dr. Levy, in reviewing -- Dr. Horovitz, excuse
3 me, in reviewing Dr. Levy's report in this case, did
4 you see that he offered an opinion about the efforts of
5 the parties after the execution of the Niacor-SR
6 license agreement?

7 A. In his expert report, yes.

8 Q. And what do you recall was his opinion?

9 A. He implied that after the execution of the
10 agreement, there was little or no attempt to move the
11 Niacor-SR ahead.

12 Q. I'm going to ask that you continue to try to
13 speak up a little bit.

14 A. Sure, sorry.

15 Q. I know the microphone is a little bit far away.
16 And did you address or did you respond in your
17 opinion in this case to Dr. Levy's opinion with respect
18 to the efforts of the parties after the execution of
19 the license agreement?

20 A. Yes, I believe so.

21 Q. Now, what was your general conclusion?

22 A. Well, I think there was documentation that
23 Schering was making attempts to get their own people
24 involved in learning about this product and to obtain
25 all the information possible from Upsher-Smith, and

1 there were project meetings reports from Upsher-Smith
2 indicating that they were moving ahead, at least for a
3 while, on trying to get the information that Schering
4 would need for their eventual filings.

5 Q. I'm going to direct your attention back, it's
6 in your binder again, CX 1042, the package that you've
7 talked about earlier, and I'll put it on the screen as
8 I did before, SP 160079.

9 A. Right.

10 Q. At the time of the license agreement with
11 Schering, which party was responsible for the
12 regulatory filings to be made overseas?

13 A. That was Schering.

14 Q. And do you know at the time of the agreement
15 what Schering's plan was in terms of when it would
16 begin preparing the overseas regulatory filings?

17 A. It appeared from what I saw that their
18 intention was to take the final reports, the integrated
19 summaries which they were due to get in October, and
20 then put them in order to be filed in the various
21 countries that they had rights to overseas.

22 Q. So, the license agreement was in June of 1997,
23 and they would obtain the documents from Upsher that
24 they would turn into their overseas filing in October
25 of 1997.

1 A. Correct.

2 Q. Now, have you seen any communications between
3 the parties during the period of time after the license
4 agreement?

5 A. Yes.

6 Q. And beginning first, bringing you back to the
7 license agreement itself, how would you describe the --
8 that agreement?

9 A. Well, you mean the one signed in June --

10 Q. The one signed in June.

11 A. That was kind of what I would call a
12 preliminary agreement. It set out the basic terms
13 between the two parties and what their responsibilities
14 was -- were, but it was not a final contract or a final
15 document. And in fact, the preliminary document
16 indicated that the two parties would complete what they
17 called the detailed agreement.

18 Q. And when you say the parties anticipated a
19 detailed agreement, is that something you've seen
20 elsewhere or is that something you saw in the contract?

21 A. I believe that's in the original agreement that
22 they signed.

23 Q. Now, do you recall when Schering's board of
24 directors approved the Niacor-SR deal?

25 A. I believe it was June 24th or 5th of '97.

1 Q. Did you see any communications between the
2 parties that related specifically to this detailed
3 agreement?

4 A. After that time, yes. Shortly after -- I don't
5 know the exact dates, but shortly after there was
6 communication between Schering and Upsher-Smith on the
7 agreement, a Mr. Thompson, I believe, from Schering and
8 a Mr. Kralovec, and they were addressing the
9 manufacturing part of the agreement, because
10 Upsher-Smith was going to manufacture for Schering, and
11 they were addressing other amendments to finalize the
12 detailed agreement.

13 Q. And did you see subsequent communications in
14 addition to the ones that followed immediately after
15 the board approval -- board of directors approval?

16 A. Well, yes, I saw many. I saw Mr. Kapur trying
17 to get more information from Mr. Troup and Upsher.
18 Eventually I saw the -- Mr. Troup and Kapur putting the
19 communication in the hands of Mr. Audibert and Mr.
20 Halvorsen. And I saw Mr. Audibert sending what
21 information he had to various people in R&D and
22 manufacturing and different parts of Schering.

23 Q. Now, you referred in that answer to actions
24 taken by Mr. Audibert after the June 1997 license
25 agreement. What types of efforts did you see Mr.

1 Audibert engaging in during that time period?

2 A. Well, he was, as I say, passing on information
3 to various people at Schering who probably would be
4 involved in the overseas filing, and he was also trying
5 to get meetings together with some of the overseas
6 people, especially regulatory and also with
7 manufacturing quality control people, trying to get
8 them together with Upsher-Smith to go over information,
9 and once again, to get them ready for overseas filings.

10 Q. And these communications you're referring to
11 right now were in advance of October 1997?

12 A. Most of them, yes.

13 Q. Now, have you seen communications directly
14 between Schering and Upsher, whether it was Mr.
15 Audibert or not?

16 A. Oh, yes.

17 Q. And what did those communications relate to?

18 A. I believe I said that a majority of them, aside
19 from the work going on on the agreement, were from
20 Schering to Upsher trying to get the information they
21 needed, the integrated summaries; from Upsher back
22 indicating that there were some delays; and then from
23 Schering back to Upsher saying, you know, when will we
24 get them and can we have them at such and such a time.

25 Q. Now, you're referring to communications where

1 Upsher advised Schering that there had been some
2 delays. Are schedule slippages or schedule delays
3 something that are common in the pharmaceutical
4 industry?

5 A. They're usually the prevalence, yes, they're
6 more common than not.

7 Q. Now, were the communications that you saw and
8 the actions that Mr. Audibert was taking internally at
9 Schering consistent with what you would expect for --
10 with Schering's intention at the time of the license
11 agreement to prepare the overseas filing when they got
12 the materials in October of 1997?

13 A. Yes, from what I saw, they were taking the
14 proper -- they were doing what they should be doing.
15 Unfortunately, it was difficult, because they didn't
16 have all the documents they needed at that time.

17 Q. Dr. Horovitz, I'm putting up on the screen
18 another slide. Do you recognize this slide?

19 A. Yes, I believe this was something that Dr. Levy
20 used in his testimony.

21 Q. And for the record, this document was
22 identified during Dr. Levy's testimony as CX 1597.

23 Beginning there with Dr. Levy's first bullet
24 point, "The non-contingent, unrestricted \$60 million
25 payment was grossly excessive," do you agree with Dr.

1 Levy's conclusion?

2 A. No, I do not.

3 Q. And why not?

4 A. Well, I believe I have testified that looking
5 at both the actual economics that was projected for the
6 deal and also the strategic reasons for considering the
7 deal that the \$60 million payment was not at all
8 grossly excessive.

9 Q. And with Dr. Levy's second bullet point, "The
10 due-diligence was strikingly superficial," do you agree
11 with Dr. Levy's conclusion there?

12 A. Certainly not those words. The due diligence
13 was done in a short period of time, but I don't see
14 that it was superficial or strikingly superficial.

15 Q. And are those the -- for the reasons that
16 you've identified earlier?

17 A. Correct.

18 Q. And do you agree that -- the third bullet point
19 is, "Post-deal, neither party showed any serious
20 interest in developing and marketing the drug," and do
21 you agree with Dr. Levy's conclusion on that point?

22 A. No, I do not. I believe that the records show
23 that both parties were communicating and trying to move
24 ahead, although there were delays and eventually a
25 decision not to go ahead, but in the post-deal period

1 of time of six months, there certainly was every effort
2 apparently being made by both parties.

3 Q. And then finally, referring your attention to
4 the top of the slide, Dr. Levy's ultimate conclusion
5 that the \$60 million was not for Niacor-SR, do you
6 agree with Dr. Levy on that point?

7 A. I don't know how he comes with that judgment,
8 because he couldn't put himself in the minds of the
9 negotiators. I can't either, but everything I have
10 seen says that the \$60 million was for the deal that
11 they made for Niacor-SR and was a reasonable amount to
12 pay at that time.

13 MR. RAOFIELD: Your Honor, I have no further
14 questions, subject to redirect.

15 MR. GIDLEY: Your Honor, I simply want to point
16 out and let Mr. Eisenstat know, since I haven't spoken
17 to him, I will have a small number of questions for
18 this witness, and I do not mean to prejudice complaint
19 counsel. I just want to call it to the Court's
20 attention. I'm happy to ask my questions after the
21 cross or now, whatever pleases the Court.

22 JUDGE CHAPPELL: Mr. Eisenstat, what's your
23 preference?

24 MR. EISENSTAT: I'd just assume they get all
25 their cards on the table, Your Honor. Let him ask the

1 questions, and then we'll know what the whole panoply
2 is of issues, and then we'll do our cross.

3 JUDGE CHAPPELL: That would be standard
4 procedure, so you go ahead, Mr. Gidley.

5 MR. GIDLEY: Thank you, Your Honor.

6 (Pause in the proceedings.)

7 MR. GIDLEY: Back on the record, Your Honor?

8 JUDGE CHAPPELL: Yes.

9 CROSS EXAMINATION

10 BY MR. GIDLEY:

11 Q. Dr. Horovitz, my name is Mark Gidley. I'm one
12 of the attorneys for Upsher-Smith Laboratories, another
13 one of the respondents in this matter. Good afternoon.

14 I want to return to the topic of SPX 2, which
15 is a memorandum from Mr. Kapur -- to Mr. Kapur from Mr.
16 Lauda, and I believe it's in your binder, and I'm going
17 to put on the screen something you were testifying
18 about earlier this morning.

19 Do you see that page, sir?

20 A. I do.

21 Q. What I've put on the ELMO is a page that's
22 Bates numbered SP 1600047. It's entitled Table II,
23 Niacor-SR Sales.

24 Do you see that, sir?

25 A. I do.

1 Q. And sir, this is a document you testified about
2 earlier today. Is that correct?

3 A. Correct.

4 Q. And sir, I believe you testified earlier today
5 that you had an opinion about the market shares in this
6 document. Is that correct, sir?

7 A. Right.

8 Q. I'm sorry?

9 A. Yes, I'm sorry, yes.

10 Q. And I believe you testified that you thought
11 that the market share from 0.75 percent to 1.5 percent
12 was reasonable. Is that correct?

13 A. For this product, yes.

14 Q. And the product here, sir, is Niacor-SR. Is
15 that correct?

16 A. Correct.

17 Q. And that's your opinion, sir?

18 A. That's right. In the markets that they had --
19 that Schering had rights to, which are defined at the
20 bottom, the very last part of the document.

21 Q. And sir, just so our record is clear, could you
22 just explain what you mean by your last answer?

23 A. Well, that Schering was only going to be
24 selling in the markets outside the U.S., Canada and
25 Mexico and that the market share that was calculated

1 for this drug was for those areas.

2 Q. Outside of the U.S., Canada and Mexico,
3 correct?

4 A. That's correct.

5 Q. Sir, I want to direct your attention to another
6 document, and this is a document from your binder, and
7 I'll zoom in in just a second.

8 I'm showing you and what's on the screen is SPX
9 235. Are you there, sir?

10 A. Correct.

11 Q. And this is a document entitled Niacor-SR
12 Supplementary Information, and at the bottom appears 23
13 June 1997. Do you see that, sir?

14 A. I see it.

15 Q. Directing your attention to B, Outlook for
16 Total Market Growth, the first bullet reads, "Seventh
17 best selling drug class today. Europe and Japan had 87
18 million hyper-lipemics in 1995, the majority were
19 untreated."

20 Do you see that?

21 A. Yes, I do.

22 Q. Sir, do you have any opinion about the growth
23 opportunity for Niacor-SR in Europe and Japan?

24 A. From that statement?

25 Q. Yes, sir.

1 A. Yes. As I believe I said in my testimony, I
2 think in all parts of the world in the mid-nineties,
3 the anti-cholesterol, anti-hyperlipidemic market was
4 going to be rapidly growing.

5 Q. And sir, did your opinion that there would be
6 rapid growth outside the United States include Japan?

7 A. Yes.

8 Q. And you just testified about growth. Do you
9 see the second bullet, and there are a number of
10 factors there?

11 A. Correct.

12 Q. Are any of those factors relevant to your
13 opinion about growth in Europe and Japan?

14 A. They all are.

15 Q. And for the record, the first bullet says,
16 "Aging Population," does it not, sir?

17 A. Correct.

18 Q. And why would that increase the market for a
19 cholesterol drug?

20 A. Because as the population ages, you get more
21 people who are going to show aberrant cholesterol
22 metabolism. That is a function of aging.

23 JUDGE CHAPPELL: Hold on, Mr. Gidley.

24 Off the record.

25 (Pause in the proceedings.)

1 JUDGE CHAPPELL: You may proceed.

2 MR. GIDLEY: Thank you.

3 BY MR. GIDLEY:

4 Q. Dr. Horovitz, I want to change to a new topic.

5 Are you aware, sir, of the June 17, 1997
6 agreement between Upsher-Smith and Schering that's
7 relevant to this case?

8 A. Yes.

9 Q. I don't believe it's in your exhibit binder,
10 but it's well known to the attorneys here. I just want
11 to make sure that you're on the same page as all the
12 attorneys in this courtroom.

13 A. Okay.

14 Q. I'm showing you the first page of the agreement
15 dated June 17, 1997.

16 A. I see it.

17 Q. It's on Schering Corporation letterhead --
18 thank you, Phil -- and as Mr. Eisenstat is pointing out
19 to me, it bears the exhibit designation CX 348. Do you
20 see that?

21 A. Yes.

22 Q. Turning inside the agreement, sir, I want to
23 direct your attention to paragraph 7 of Exhibit A.

24 A. I see it.

25 Q. Let me see if I can zoom that in for you.

1 A. That's fine, I can read it.

2 Q. Are you able to make that out?

3 A. Yes.

4 Q. Now, sir, earlier today I understand -- I
5 understood you to give an opinion about various
6 valuation scenarios and about a \$100 million payment in
7 respect of Niacor-SR. Did I summarize your testimony
8 correctly? Do you recall giving that -- do you recall
9 giving that opinion?

10 A. I believe I said that certainly at \$100
11 million, the value to Schering was reasonable, yes.

12 Q. And in giving that opinion, were you evaluating
13 the license agreement between Upsher-Smith and
14 Schering-Plough in respect of Niacor-SR?

15 A. Primarily -- actually, all Niacor-SR, even
16 though I knew there were other products as part of that
17 deal.

18 Q. Is your opinion about the \$100 million payment
19 contingent in any way on the supply agreement that
20 appears in the last sentence of paragraph 7, which
21 reads, "The SP Licensee shall have the option, in its
22 sole discretion, of purchasing all or a portion of its
23 supplies of Niacor-SR from Upsher-Smith at its cost of
24 goods"?

25 A. I did not take that into consideration except

1 in reading it I said to myself that, well, this makes
2 the deal even better --

3 Q. So, you think --

4 A. -- for Schering.

5 Q. I'm sorry, sir.

6 A. This would make the deal even better for
7 Schering.

8 Q. So, you think that that ability of Schering to
9 call upon Upsher-Smith to produce the product at
10 Upsher's cost of goods would have positive value for
11 Schering. Is that your opinion?

12 A. Yes, it would make Schering's margin better,
13 and that would be positive.

14 Q. Sir, in your experience in doing pharmaceutical
15 in-licensing transactions, have you ever had those
16 transactions not turn out to be financially profitable
17 for your company? Has it ever been the case that
18 things have not turned out as you planned at the time
19 of the deal?

20 A. If I wasn't under oath, I would try to avoid
21 that question, but the answer is yes, I have.

22 Q. And like most human beings and most human
23 endeavors, is it the case that the individuals are not
24 clairvoyant, they do not see into the future with 100
25 percent accuracy? Is that correct, sir?

1 A. That's correct, and I think you have to
2 remember that what you're dealing with is essentially
3 biology, drugs. You can't predict completely what
4 drugs will do, especially from small populations to
5 large populations.

6 Q. Finally, sir, I want to talk about an opinion
7 that was rendered earlier in this courtroom. In your
8 experience in due diligence for in-licensing
9 transactions, have you ever asked the other party
10 to perform liver biopsies as part of the due
11 diligence that you're performing on an in-licensing
12 opportunity?

13 A. No, I don't -- I do remember that -- actually,
14 in pravastatin, our friends at Sankyo suggested that we
15 might have to do that, and that -- it's a little more
16 common in Japan than it is in the United States, and
17 we -- our response was, well, we didn't think that's
18 something you want to do unless you really have overt
19 hepatotoxicity, and we discussed the issue with the
20 FDA, and they said don't be ridiculous, unless you, you
21 know, really have hepatotoxicity, then we can discuss
22 it. So, the answer is no, we've never -- I never
23 remember any experience like that.

24 MR. GIDLEY: No further questions.

25 JUDGE CHAPPELL: Cross?

1 CROSS EXAMINATION

2 BY MR. EISENSTAT:

3 Q. Dr. Horovitz, you use a net present value
4 calculation in your assessment of the value of the drug
5 Niacor. Is that correct?

6 A. That's correct.

7 Q. And could you just explain what net present
8 value means?

9 A. Well, it's the present value of the cash stream
10 essentially that the company will receive for that
11 deal.

12 Q. And --

13 A. Over -- usually it's done over a period of
14 time. I used ten.

15 Q. And when you use the term "present value of the
16 cash stream," is there a mathematical formula that
17 tells us what the value of a payment in the future is
18 today?

19 A. Yes, I used an Excel computer formulation. I
20 don't know the exact -- I don't know that I could tell
21 you exactly how that's calculated, but it's pretty
22 standard in the industry.

23 Q. Now, let me show you a graphic that -- if I can
24 get this going -- ah, yes, thank you.

25 Can you see that?

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1 A. Yes, um-hum.

2 Q. My research told me that the net present value
3 of a payment in one year was simply the payment amount
4 divided by 1 plus r where r is the appropriate discount
5 rate. Does that comport with your understanding of
6 what net present value would be for a payment due in
7 one year?

8 A. For a payment due in one year?

9 Q. Yes.

10 A. Yes, if you're just looking at the value of
11 that payment without looking at the return.

12 Q. But that would be the value -- that would be
13 the value of today's -- in today of that payment in one
14 year. That's how I'd calculate it?

15 A. R is the discount rate, yeah, okay.

16 Q. And just for the record, that demonstrative was
17 CX 1690.

18 And I have another demonstrative, CX 1691, and
19 this is again my -- what my research told me was that
20 the net present value of a payment due in two years
21 would be the payment amount divided by 1 plus the
22 appropriate discount rate squared, that is, one plus
23 the discount rate times one plus the discount rate.
24 Does that comport with your understanding of how you
25 calculate the net present value?

1 A. You're multiplying the first year times the
2 second year?

3 Q. One plus the discount rate is squared, and that
4 amount is divided into the payment amount to bring it
5 back to the net present value.

6 A. Without thinking that through, it sounds right.

7 Q. You're not comfortable with doing that?

8 A. No, I would have to think about that.

9 Q. Well, when we're calculating the net present
10 value, if the payment amount changes, the net present
11 value will change. Is that fair?

12 A. Correct.

13 Q. And when we're calculating the net present
14 value, if the discount rate changes, that will also
15 change the net present value. Is that fair?

16 A. I agree with that.

17 Q. Now, when Mr. Audibert was doing his analysis
18 of the future stream of sales that Schering could get
19 from Niacor-SR, he didn't know what the actual sales of
20 Niacor-SR were going to be in any year, did he?

21 A. No, he did a projection.

22 Q. And that's because in 1997, no one could know
23 what sales were actually going to be in the future.

24 A. I agree with that.

25 Q. And in fact, Mr. Audibert's estimates of the

1 sales for Niacor in each of those years was incorrect.

2 Isn't that true?

3 A. In '97, he didn't know.

4 Q. But today we know that his estimates were wrong
5 in every year, weren't they?

6 A. Today we know that there were never any sales.

7 Q. So, his estimates were wrong every year,
8 correct?

9 A. You can -- you can say that, yes.

10 Q. The actual sales by Schering were zero in each
11 of the years. Is that right?

12 A. That is a correct statement.

13 Q. And if we took the net present value of that
14 stream of zero sales and the cost for Schering to enter
15 into the deal, that net present value of that deal
16 would be negative. Is that right?

17 A. That is correct.

18 Q. When Mr. Audibert did his analysis, Mr.
19 Audibert and Mr. Lauda simply assumed that the product
20 they were licensing was going to get European
21 regulatory approval. Isn't that correct?

22 A. That is correct.

23 Q. And getting European regulatory approval is not
24 certain at any time, is it?

25 A. No, it's never certain, that's correct.

1 Q. And it was not certain in 1997, was it?

2 A. It's never certain.

3 Q. And it wasn't back then when they did their
4 analysis, was it?

5 A. If it's never certain, I assume it wasn't back
6 then.

7 Q. And Niacor-SR never got regulatory approval in
8 any European country, right?

9 A. It was never submitted, so it never got
10 approval, that's correct.

11 Q. So, that assumption that they made, that they
12 would get regulatory approval, that was another
13 assumption that was simply incorrect.

14 A. Their assumption that they would get regulatory
15 approval was based on what they knew in '97, the
16 information they had and the fact that they anticipated
17 filing it.

18 Q. And in retrospect, that assumption was
19 incorrect.

20 A. In retrospect, it was never approved.

21 Q. Are there factors you could look at when you're
22 doing an evaluation of a drug that would help you
23 assess the likelihood that a drug would get approval?

24 A. Factors? Is that your question?

25 Q. Yeah, yeah.

1 A. You do that assessment based on your knowledge
2 of what the regulatory bodies want and if your data
3 will support what they want.

4 Q. So, would you look at the data to see if there
5 were problems with the data to make an assessment of
6 the likelihood of getting the regulatory approval?

7 A. Yes.

8 Q. Could patent licensing issues have an impact on
9 the sales of a product in Europe?

10 A. Could patents -- I'm not sure what you mean by
11 "patent license." Could patents, is that your
12 question?

13 Q. Could patent issues affect the sales you would
14 get from a product in Europe?

15 A. Well, they could affect your being able to sell
16 obviously if -- if another party has a patent that
17 restricts you, that covers your product.

18 Q. And could competitive issues, that is, could
19 the competition you face in the market, could that
20 affect sales you would expect to get in the -- for a
21 product for sale in Europe in the future?

22 A. Yes, any analysis should look at the
23 competition that you expect.

24 Q. Is one of the reasons that pharmaceutical
25 companies do due diligence investigations is to find

1 out if there's any information available that would
2 help them to get their hands around what the likely
3 sales of this product were going to be in the future?

4 A. Yes.

5 Q. Now, in your work, I believe you assumed a
6 discount rate of 10 percent. Is that correct?

7 A. That's correct.

8 Q. Does that 10 percent assume a certain
9 probability that Schering would get European regulatory
10 approvals for Niacor-SR?

11 A. Well, the discount assumes the possibility that
12 either the drug would have some problems and be delayed
13 or it may never have approval. That's why you take a
14 discount.

15 Q. Can you translate that discount rate of 10
16 percent into the probability that Schering would make
17 those sales in Europe that Mr. Audibert projected?

18 A. Yes, you can say that -- then you're
19 calculating that there's 90 percent chance that it
20 would meet those criteria that were in the analysis.

21 Q. So, your testimony is that if you apply a 10
22 percent discount, you're assuming there's only a 10
23 percent chance that Mr. Audibert will not meet those
24 numbers?

25 A. There's a 10 percent chance that the

1 assumptions used for those numbers will change, yes.

2 Q. If one assumed that there was a -- only a 50
3 percent chance that the drug would get regulatory
4 approval in Europe, what would be the appropriate
5 discount rate to use to evaluate the drug?

6 A. Well, I never look at it that way. I mean,
7 usually the discount rates are based on the knowledge
8 that the company has as to the chance of getting on the
9 marketplace for a drug, and it's usually related to
10 where it is in the development process, because you --
11 it's very hard to put a probability number on something
12 that you just don't know will happen or not happen.

13 Q. So, if someone assumed, though, that there was
14 a 50 percent chance that Schering-Plough would be able
15 to make these sales projections that Mr. Audibert put
16 together, what would be the appropriate discount rate
17 to use to find the net present value of that stream of
18 income?

19 A. You could use 50. I mean, I -- if that's a
20 clear assumption that you're making, that there's only
21 a 50 percent, you could use a 50 percent. I think it
22 would have been difficult to come up with that number
23 at that time.

24 Q. And a 50 percent discount rate would have a
25 substantially smaller net present value than using a 10

1 percent discount rate?

2 A. Correct.

3 Q. Could you tell us what a late stage drug is?

4 A. That isn't a clear definition, but in my
5 definition, it is something that is -- that either has
6 the results of the two pivotal trials for approval,
7 clinical pivotal trials, or is well into the two
8 pivotal trials so that the data would be available
9 shortly.

10 Q. And when a company -- well, was Upsher-Smith --
11 was Niacor-SR in your view a late stage drug?

12 A. Yes.

13 Q. When a company has a drug that's a late stage
14 drug and they're doing phase III clinical trials, these
15 pivotal studies you've talked about, would that company
16 have communications with the FDA?

17 A. I would assume so, yes.

18 Q. And do you know if in the industry a company
19 would maintain a file of those communications with the
20 FDA?

21 A. That is usually what is done, yes.

22 Q. Do you know if Upsher-Smith maintained a file
23 of those communications with the FDA?

24 A. I -- I did see a few communications with the
25 FDA. I believe one was put into evidence, a phone

1 communication, this morning.

2 Q. That's -- that was in your notebook?

3 A. Yes.

4 Q. And that's --

5 A. It was --

6 Q. -- SPX 267?

7 A. I'll check it. That's correct.

8 Q. Is it unusual for the FDA to communicate with
9 companies by telephone like that?

10 A. No, not at all. There are much more telephone
11 conversations than there are meetings.

12 Q. And is it typical for companies to maintain
13 records of those phone conversations as Upsher-Smith
14 did in this case?

15 A. When -- when there is something in the
16 discussion that is relevant to what is necessary for
17 the project and FDA's giving an opinion, yes.

18 Q. Do you know if anybody from Schering-Plough
19 looked at the FDA files of Upsher-Smith before they
20 licensed Niacor-SR?

21 A. No, I don't.

22 JUDGE CHAPPELL: Mr. Eisenstat, let me know
23 when you finish this line of questioning.

24 MR. EISENSTAT: Your Honor, we could break at
25 your convenience. Now would be fine.

1 JUDGE CHAPPELL: Okay, let's go ahead and take
2 our lunch break. We'll recess until 1:45.

3 (Whereupon, at 12:45 p.m., a lunch recess was
4 taken.)

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AFTERNOON SESSION

(1:45 p.m.)

JUDGE CHAPPELL: Mr. Eisenstat, you may proceed.

BY MR. EISENSTAT:

Q. Dr. Horovitz, before lunch we were talking about my little picture of net present value of a future payment, and you had told us how you had used a 10 percent discount rate to reflect the risk that the product wouldn't achieve its projected goals. Is that right?

A. Correct.

Q. Would it also be appropriate to include in the discount rate the cost of capital to Schering-Plough?

A. Yes, that essentially is usually included in that discount rate.

Q. And when you calculated the internal rate of return for your projections, would you then compare that to what Schering's cost of capital was to see if it was a good deal for them?

A. I didn't in the first go-through, because I didn't know, but I found out subsequently that they usually use 13 percent.

Q. So, one should compare that internal rate of return to 13 percent to see if it was a good deal for

1 Schering?

2 A. Yes, if that's what they're used to as their
3 cost of capital.

4 Q. This morning you talked a little about dosing
5 on different schedules during the day, and I have a
6 question. Is dosing at bedtime the same thing as
7 dosing with the evening meal?

8 A. No, it's actually not.

9 Q. Right before lunch we had started to talk about
10 FDA files, and we had found that indeed you had gotten
11 at least one document out of Upsher's FDA files.

12 Do you know if anybody from Schering ever
13 inquired about the status of the FDA submissions to
14 Upsher-Smith?

15 A. No, I don't know that.

16 Q. Is that something you probably would have done
17 if you were in Schering's position, probably at least
18 ask Upsher-Smith if there was any outstanding FDA
19 issues?

20 A. Your latter statement I think I would have
21 done, yes, I would have asked them if the FDA had any
22 outstanding issues.

23 Q. In your experience, are you aware of any
24 instances where a licensing deal was done for a late
25 stage drug where there wasn't at least an inquiry made

1 of the licensor about the regulatory status of the
2 drug?

3 A. Not in my experience, no.

4 Q. Do you know what a pharmacokinetic study is?

5 A. Yes.

6 Q. And what's a pharmacokinetic study?

7 A. Well, there are different studies. That term
8 is all-inclusive of a number of different studies, but
9 generically it's to look at the absorption, metabolism
10 and excretion of a new chemical entity in the body.

11 Q. Do you have any experience with pharmacokinetic
12 studies, doing them yourself for niacin?

13 A. For niacin myself, no.

14 Q. Have you had any experience reading them or
15 reviewing them yourself for niacin?

16 A. No, I don't believe so.

17 Q. Would a successful pharmacokinetic study be
18 necessary before Upsher-Smith could file their NDA with
19 the FDA?

20 A. Before they could file?

21 Q. Yes.

22 A. Or get approval?

23 Q. Before they could file.

24 A. File? Not necessarily before they could file.

25 Q. Okay. Would it have been necessary before they

1 got approval?

2 A. My impression at that time was that the FDA in
3 some cases had approved drugs without pharmacokinetic
4 studies; however, it could affect the labeling of the
5 product, meaning it would be difficult for them to get
6 a sustained release labeling if they didn't show that
7 it was sustained release with the pharmacokinetic
8 study.

9 MR. EISENSTAT: One moment, Your Honor.

10 JUDGE CHAPPELL: Looks like a pretty thick box
11 there, Counselor.

12 MR. EISENSTAT: Yes, yes. I still do things
13 the old way, Your Honor, with paper. I'm not
14 comfortable putting my precious documents in the
15 computer yet.

16 JUDGE CHAPPELL: Well, as we've seen, the
17 electronics do go out from time to time.

18 MR. EISENSTAT: May I approach the witness,
19 Your Honor?

20 JUDGE CHAPPELL: Yes, you may.

21 BY MR. EISENSTAT:

22 Q. Dr. Horovitz, I'm going to hand you what's been
23 marked as CX 1379, and it's a document that came from
24 the files of Upsher-Smith, and I believe it has been
25 admitted into evidence in this case.

1 Have you ever seen this document before?

2 A. I'm not sure at this point in time. It's
3 possible, but I don't recollect it just looking at it
4 this second.

5 Q. It appears to be a facsimile transmission from
6 a Julie Reed at the Center for Drug Evaluation and
7 Research at the FDA to Cindy Farner at Upsher-Smith
8 Laboratories. Do you see that?

9 A. Yes.

10 Q. Would it be unusual when a company is working
11 on getting a drug approved at the FDA for the FDA to
12 send them faxes?

13 A. No, not at all.

14 Q. Would there be anything unusual about the fact
15 that this came as a fax?

16 A. No.

17 Q. Could you turn to the second page of the
18 document.

19 A. The second page or page 1 or 2?

20 Q. Yeah, it says page 1 at the top. The first
21 page is that fax transmission.

22 A. Yes, I have it.

23 Q. And do you see that this communication is about
24 Upsher-Smith's having a problem detecting niacin and
25 niacin metabolites in plasma? On the first line under

1 Comments.

2 A. Yes.

3 Q. Could you tell me what metabolites are?

4 A. Metabolites are the breakdown of products in
5 the body of the original drug you put in, in this case
6 niacin.

7 Q. Okay. And is that something that the FDA would
8 need to be able to measure in doing these
9 pharmacokinetic studies?

10 A. Well, they would want to know if there are
11 major metabolites, number one, and if there are, can
12 they be measured and identified.

13 Q. And the first sentence says, "We have good
14 reason to believe that your inability to detect niacin
15 and niacin metabolites in plasma is due to inadequate
16 study design of Protocol 901455."

17 A. Right.

18 Q. Do you know what Protocol 901455 is?

19 A. No, I don't know that I've ever seen it.

20 Q. As far as you know, that was never supplied to
21 you?

22 A. I don't remember seeing it, not at least by
23 that number.

24 Q. And under the numbered paragraph 3, the
25 document goes on to say or the document reads, "The

1 following studies will need to be performed to support
2 the Human Pharmacokinetics and Bioavailability section
3 of a future NDA submission for this product.

4 "A, A single-dose, randomized crossover
5 bioavailability/dosage form equivalence study comparing
6 each dosage strength you intend to market with the
7 currently-marketed immediate release form of niacin.
8 The dose given should be sufficient to detect above
9 baseline levels (1500-2000 mg)."

10 Do you see that?

11 A. Yes.

12 Q. Do you know if that's a standard kind of test
13 that's run?

14 A. It's not an unreasonable request.

15 Q. The next paragraph says, "B, Single-dose,
16 randomized crossover food-effect study comparing
17 Nicolar under the following conditions: 1, fasting; 2,
18 immediately after a high-fat breakfast; 3, immediately
19 after a low-fat breakfast. The purpose of treatment 2
20 is to determine whether the dosage form will fail and
21 dump niacin after this type of meal. Treatment 3 is
22 the type of meal that a hypercholesterolemic patient
23 might be expected to consume."

24 Again, have you seen requests for studies like
25 this before?

1 A. Once again, I would not consider that an
2 unreasonable request for this type of drug.

3 Q. And C is a "Multiple-dose, randomized crossover
4 study using the dosing regimens used in the Phase III
5 trials."

6 Again, is that the kind of --

7 A. Sometimes they do ask for multiple dose after
8 single dose. I'm not sure with this drug that that
9 would have been necessary, but it's not -- you know,
10 it's not really an unusual request.

11 Q. And this is all about the Niacor-SR, right?

12 A. Yes.

13 Q. And D says, "As discussed in the 7/17/95
14 meeting, if the equipment, process, site, and
15 formulation changes proposed by USL are carried out, a
16 bioequivalence study between the formulations used in
17 the clinical trials and the to-be-marketed formulations
18 will be needed."

19 Again, is that typical, for them to ask for
20 that?

21 A. Yes, when you change a formulation, they
22 usually ask for what they call a bioequivalence study,
23 meaning you're looking at the pharmacokinetic
24 parameters of the formulation you had before compared
25 to the new formulation, and you want to see that they

1 are equivalent.

2 Q. Had you seen this -- had you been in Schering's
3 shoes and had seen this document before you signed the
4 license for Niacor-SR -- and I believe the document's
5 dated before the license was signed for Niacor-SR --
6 would this have raised any issues to you?

7 A. Not really, because these are all fairly easy
8 and quick studies to do, assuming you're in the right
9 dose range, as the FDA points out, and I don't think
10 they would have cost much money or been very
11 time-consuming to get done well before Schering would
12 have had their filings overseas.

13 Q. Do you --

14 A. Assuming they were started.

15 Q. -- do you have any personal experience in doing
16 any of these three types of studies?

17 A. Not myself, but I certainly have seen these
18 done on drugs I was involved with and, you know, read
19 the reports, et cetera, et cetera.

20 Q. Have you ever seen them done on niacin drugs?

21 A. No.

22 Q. Do you know how many PK studies Kos had to do
23 before they finally got their NDA?

24 A. No.

25 Q. Do you know if these studies were done?

1 A. No, I don't know one way or the other.

2 Q. The next document I'd like to show you has been
3 marked as CX 1382. Again, this is a document from the
4 files of Upsher-Smith, and it has been admitted into
5 evidence in this matter.

6 Just looking for a moment at the first page of
7 the document, it appears -- I guess we have to look at
8 the first two pages -- it appears to be a letter from
9 Mark Halvorsen to Solomon Sobel. Do you see that?

10 A. Yes.

11 Q. Do you know who Solomon Sobel is?

12 A. Yes, he was a member of the Food and Drug
13 Administration.

14 Q. Okay. Do you know who Mark Halvorsen was?

15 A. Yes, he was an employee of Upsher-Smith.

16 Q. If we turn back to the document, we come to a
17 part labeled -- and I apologize, the heading's a little
18 bad on this one -- it appears to read, "Upsher-Smith
19 Laboratories, February 5th, 1997, Meeting Minutes with
20 FDA Regarding Niacor-SR," and there's an IND number.

21 A. Um-hum, I think I have it. There's not -- it
22 has a page 1 on the bottom?

23 Q. Yes.

24 A. Yes.

25 Q. It's on the ELMO right now.

1 A. Oh, I'm sorry.

2 Q. Is that the same page?

3 A. Yes.

4 Q. Okay. The first paragraph reads, "On February
5 5th, 1997, Upsher-Smith Laboratories, Inc.
6 representatives met with FDA representatives from the
7 Division of Pharmaceutical Evaluation II and the
8 Division of Metabolism and Endocrine Drug Products to
9 discuss pharmacokinetic issues regarding Niacor-SR."

10 Do you see that?

11 A. Yes.

12 Q. Is this -- is this something, again, that is
13 typical in the -- or -- in the pharmacy industry, that
14 after a meeting with the FDA, a company that met with
15 them would send meeting minutes back to the FDA?

16 A. Yes, yes.

17 Q. And underneath that first paragraph, there's a
18 list of participants in the meeting. Do you see that?

19 A. Correct.

20 Q. And one of the participants for the FDA is a
21 gentleman by the name of Fossler?

22 A. Yes, I see that.

23 Q. And another one is Hunt. Do you see that?

24 A. Yes.

25 Q. Could you turn to the next page, then, the page

1 with the number 2 at the bottom, and the Bates
2 numbering in the lower right-hand corner is 107434.

3 A. Correct.

4 Q. And I direct your attention to the second
5 paragraph -- well, let me ask you this, I don't think I
6 asked, have you seen this document before?

7 A. I believe it is coming back to me that I did
8 see this, yes.

9 Q. This is one you saw?

10 A. One I saw.

11 Q. Okay. And the second paragraph says, "Dr.
12 Fossler explained that the issue is qualifying the
13 product for a sustained release or extended release
14 claim. The efficacy and bioavailability conditions are
15 probably met and the application is probably filable
16 with existing data without an extended release claim.
17 In order to obtain an extended release claim,
18 metabolite levels need to be detectable showing the
19 differences between an immediate release and the
20 extended release dosage form. Mr. Hunt supported Dr.
21 Fossler's explanation, indicating that Upsher-Smith
22 does not have adequate data to meet the regulatory
23 requirements for an extended release product."

24 Do you see that?

25 A. I see that.

1 Q. And that's consistent with your recollection
2 that at least you'd need this kind of PK study in order
3 to -- or a PK study in order to get an extended release
4 claim?

5 A. That's correct.

6 Q. Was an extended release claim important for
7 Niacor-SR?

8 A. I believe it would be, sure.

9 Q. Do you know whether Schering ever made any
10 inquiry about this issue to Upsher-Smith?

11 A. I don't know one way or the other.

12 Q. Let's turn to the next page of the document,
13 page 3, bearing the Bates number 107435.

14 A. Okay.

15 Q. And look at the first full paragraph on that
16 page. "Dr. Fossler summarized that a crossover study
17 between immediate release and sustained release
18 products, evaluating for all the urinary metabolites,
19 would be acceptable. Mr. Hunt commented that a lack of
20 dose dumping would need to be demonstrated as well.
21 Considerable discussion followed regarding whether the
22 already performed single dose study, although
23 inadequate in design, may adequately demonstrate a lack
24 of dose dumping under fed and fasting conditions. It
25 was noted that the product will be labeled to take with

1 meals."

2 Do you see that paragraph?

3 A. Yes.

4 Q. What does it mean for a product to be labeled
5 to take with meals?

6 A. Essentially the label indicates that it should
7 be prescribed to take while you're having a meal,
8 eating.

9 Q. And that would be different than a bedtime
10 dosing?

11 A. Somewhat different, yes. It depends on when
12 you have your last meal.

13 Q. Are you being facetious?

14 A. No.

15 Q. No?

16 A. Some people eat very late.

17 Q. Okay.

18 A. When I was in college, my meal was 11:00 at
19 night and then I went to bed, and that's why I have a
20 stomach, but -- but normally, I would grant you that
21 most people have a time between when they eat their
22 last meal and when they go to sleep.

23 Q. Are you aware that when Mr. Audibert did his
24 study, he reported that Niacor-SR was a product to be
25 taken at bedtime?

1 A. I believe that was the plan, even though the
2 two pivotal studies didn't necessarily study that.
3 They were planning to study that, yes.

4 Q. So, at the time he wrote that study, that
5 assumption was incorrect, right?

6 A. No. At the time he did his evaluation you're
7 saying?

8 Q. Yes.

9 A. Their plan was hopefully to have it taken at
10 bedtime. That's why they were going to do the
11 subsequent studies, the two protocols.

12 Q. First of all, let me show you what's been
13 marked as CX 1044.

14 A. Are we done with this or --

15 Q. Yes, for now, yes.

16 A. For now.

17 Q. In fact, you have this. I won't -- yeah,
18 just -- do you have your notebook from this morning?

19 A. Yes.

20 Q. Could you look at tab 2, the tab that says SPX
21 2?

22 A. Okay.

23 Q. Do you have that in front of you?

24 A. I do.

25 Q. And could you turn to the page where the bottom

1 number is SP 1600044? The top heading says,
2 "Niacor-SR."

3 A. All right.

4 Q. And the first line there says -- reads,
5 "Niacor-SR is a patented sustained release niacin
6 product designed to be administered at bedtime."

7 Do you see that?

8 A. Correct.

9 Q. Now, at the time he wrote this, it was not
10 designed to be administered at bedtime, was it?

11 A. No, that's not correct. At the time he wrote
12 this, there was no extensive clinical data to say it
13 could be administered at bedtime, but there were
14 protocols, if you want to call them, designs to study
15 whether it could be given at bedtime.

16 Q. Okay, and you pointed out one of those
17 protocols this morning. Is that right?

18 A. That's correct. They're in this book, too, I
19 believe.

20 Q. Yes, is it SPX 72?

21 A. Yes.

22 Q. Now, at the time Mr. Audibert did his analysis,
23 the study that's described in this protocol had not
24 been done. Is that correct?

25 A. I believe that's correct.

1 Q. Do you know if this had started?

2 A. If this study started?

3 Q. If it had been started by the time Mr.

4 Audibert --

5 A. Oh, I don't know.

6 Q. Do you know if it was ever started?

7 A. I don't know.

8 Q. And your testimony I believe is that this --
9 this synopsis or this protocol would call for a study
10 of the Niacor-SR product in a bedtime dosing?

11 A. Yes, a comparison of a two-times-a-day group
12 with groups that were dosed at bedtime.

13 Q. Could you turn to the page that -- of this
14 document bearing the number SP 1600117? Do you have
15 that in front of you?

16 A. Um-hum.

17 Q. It says, "3.2, Dosing Regimen."

18 A. Um-hum.

19 Q. And it says, "The mandatory seven-week
20 titration period will involve dosing Niacor-SR for one
21 week at 500 milligrams per day and six weeks at 1000
22 milligrams per day."

23 A. Um-hum.

24 Q. "The 18-week treatment will maintain the
25 Niacor-SR dose at 1500 milligrams per day. Dosing will

1 be twice daily with meals or a single dose with the
2 evening meal, depending on randomization. See Table 1
3 for summary."

4 A. Um-hum.

5 Q. Does that say anything about dosing at bedtime?

6 A. No, that's telling the physician to give the --
7 well, wait a minute.

8 That is the group -- that's group one, if you
9 go back to the second page, that is 500 milligrams QAM
10 and 1000 milligrams QPM. That's what they're talking
11 about there. The other groups are QHS, which would
12 mean at bedtime.

13 Q. What about the single dose with the evening
14 meal?

15 A. Yes, that's in group one, the 1000 milligrams
16 QPM.

17 Q. Do you see anything in the dosing regimen
18 explaining the dose --

19 A. That's the twice -- excuse me, that's the twice
20 daily dosing which is on page 0114 as group one.

21 Q. Do you see anything in that dosing regimen
22 explaining the other dosing groups?

23 A. Not in that paragraph.

24 Q. Do you see it anywhere in that section?

25 A. I haven't looked, but it's clear in the study

1 procedure, at least it would be to me, that the other
2 two groups are dosed once a day at bedtime.

3 Q. But could you look through the dosing regimen
4 section and see if you see anything in there that it
5 says about that?

6 A. You mean paragraph 3.2?

7 Q. Yes.

8 A. I'm just assuming that that 3.2 is only
9 discussing group one, because they're the only ones
10 that will be dosed twice a day.

11 Q. And you read that sentence, "Dosing will be
12 twice daily with meals or a single dose with the
13 evening meal," as being the group one people?

14 A. No, in group one, I'm reading that to say that
15 they will be given dosing twice a day, once in the
16 morning and once with the evening meal.

17 Q. I guess I'm just having a hard time
18 understanding that. I just see that last sentence
19 under 3.2, Dosing Regimen, "Dosing will be twice daily
20 with meals or a single dose with the evening meal,
21 depending upon randomization," and I didn't see anybody
22 in group one who was getting --

23 A. A single dose.

24 Q. -- a single dose. Do you see anybody in group
25 one who's getting a single dose?

1 A. No, that's correct. I think, then, that that
2 probably is just a mistake. Either it's -- either it's
3 a mistake in saying with the evening meal or it's a
4 mistake on page 2 saying once at bedtime.

5 Q. Okay. And you don't know where the mistake --
6 which the mistake would be?

7 A. No.

8 Q. And you don't know if that study was ever
9 undertaken?

10 A. I do not know.

11 Q. Going back to CX 1382, that's that February
12 5th, 1997 meeting minutes document, and that's not in
13 your book.

14 A. Oh, that's the one you gave me, yes.

15 Q. Right.

16 A. This thick one.

17 Q. Yes. Could you turn to the page with the Bates
18 number 107436, it's page 4 of the Niacor-SR February
19 5th, 1997 meeting minutes.

20 A. Yes, I have it. I have it.

21 Q. Do you see the last paragraph on that page,
22 "Dr. Robbins asked if the NDA would be filable with the
23 existing data and subsequently amending the application
24 with the results of the new study. There was
25 considerable discussion regarding this proposal. Dr.

1 Orloff concluded that under user fee regulations, the
2 NDA should be approvable at the time of filing. Due to
3 the known pharmacokinetic issues outstanding for
4 Niacor-SR, the FDA should not file the NDA without the
5 requested pharmacokinetic study results."

6 Do you see that?

7 A. Yes, I do.

8 Q. Does that indicate to you that they would
9 have -- Upsher-Smith would have needed to complete
10 their pharmacokinetic study before they could file
11 their NDA?

12 A. That certainly is what it sounds like.

13 Q. Do you know if they ever did their
14 pharmacokinetic study?

15 A. No, although I know at the time -- in the
16 summer period of time, I did see Upsher-Smith project
17 team minutes, and they were certainly working on it.
18 They had an outside contractor working on the assays,
19 and it certainly indicated to me they were planning on
20 doing it. Whether they ever accomplished it, I don't
21 know.

22 Q. Did you ever see any communications between
23 Upsher-Smith and Schering where Upsher-Smith told
24 Schering that they had to do this pharmacokinetic
25 study?

1 A. No, not specifically. I never saw that.

2 Q. Did you ever see any indication from
3 Upsher-Smith asking for help from Schering on doing a
4 pharmacokinetic study?

5 A. No, I can't remember that I saw anything.

6 Q. Turning to the next page of the document, page
7 5 of the Niacor-SR February 5th, 1997 meeting minutes,
8 which bears the Bates number 107437, the paragraph
9 reads, "In summary, Upsher-Smith and the FDA agreed to
10 the following conclusions: A three-way crossover study
11 will be performed with one 1000 milligram immediate
12 release niacin fasting arm and two 1000 milligram
13 sustained release arms, one fed and one fasted. There
14 will be approximately 10 to 15 subjects per arm, with
15 urine collection at predose, 0 to 1, 1 to 2, 2 to 4, 4
16 to 6, 6 to 8, 8 to 12, and 12 to 24 hours post-dose.
17 Urinary excretion of niacin and its metabolites will be
18 analyzed. Standardized meals will be administered
19 throughout the study. No aspirin will be used due to
20 its effects on the metabolism of niacin. Upsher-Smith
21 dissolution data to be provided will be evaluated to
22 determine if a 250 milligram arm, either fed or fasted,
23 is necessary."

24 Does that summarize to you what Upsher-Smith
25 now had to do with respect to pharmacokinetic studies?

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1 A. Well, that's read exactly from what the FDA
2 apparently concluded.

3 Q. All right. You said you thought
4 pharmacokinetic studies didn't take very long and
5 didn't cost very much. Is that right?

6 A. That's correct.

7 Q. Do you know --

8 A. Comparatively.

9 Q. Excuse me?

10 A. Comparatively to phase III clinical trials.

11 Q. Do you know of any reason why Upsher-Smith
12 wouldn't do their pharmacokinetic study if they were
13 serious about moving forward on Niacor-SR?

14 A. No.

15 Q. The next document I'd like to show you has been
16 marked CX 1383. It is also from the files of
17 Upsher-Smith, and it has also been admitted into
18 evidence.

19 This appears to be another fax from the Center
20 for Drug Evaluation and Research of the FDA to Cindy
21 Farner at Upsher-Smith. Do you see that?

22 A. Yes.

23 Q. Could you turn to the second page of the
24 document.

25 A. Um-hum.

1 Q. And this is a document -- on the front it's
2 dated March 26th, 1997, and remember the last paragraph
3 that we read in the last document, they were talking
4 about getting dissolution data and seeing if they
5 needed to add another arm to their study?

6 A. Correct.

7 Q. And do you see in the first paragraph here, we
8 have an answer to that question, and the paragraph
9 says, "Upon review of the comparative dissolution data,
10 it appears that the 250 and 500 milligram differ
11 sufficiently such that a waiver of the requirement for
12 pharmacokinetic data for the 250 milligram tablet
13 cannot be granted. Therefore, the proposed study
14 design should be amended to include a fourth treatment
15 arm administering a 4 X 250 milligram tablets under fed
16 conditions."

17 Do you see that?

18 A. I do.

19 Q. And so that was a continuation of that
20 discussion they had at their previous meeting?

21 A. I believe that to be so.

22 Q. And then paragraph 2 says, "We continue to
23 believe that the recommendations as faxed to
24 Upsher-Smith on 1/13/97 represent the ideal manner in
25 which to study the controlled release characteristics

1 of Niacor-SR. However, as discussed in the 2/5/97
2 meeting between your firm and the Agency, if
3 Upsher-Smith feels that single doses of niacin above
4 1000 milligrams represent a significant safety concern
5 when given to normal volunteers, then the design as
6 outlined in your submission dated 2/24/97 will be
7 sufficient for filing, provided that a 250 milligram
8 treatment arm is added to the study. It is emphasized
9 that approval of Niacor-SR as a controlled-release
10 product is dependent on the results of the submitted
11 study, and not merely on its completion."

12 Do you see that paragraph?

13 A. I do.

14 Q. If you were in the shoes of Schering-Plough and
15 were going to license Niacor-SR from Upsher-Smith,
16 would you have wanted to review this correspondence
17 before you signed the license deal?

18 A. Well, if I knew about it, I would like to have
19 seen it, yes.

20 Q. The last document I want to show you about
21 these PK studies is a document bearing the number
22 CX 1111, also a document from the files of Upsher-Smith
23 and also admitted into evidence.

24 This is a letter from Paul Kralovec, chief
25 financial officer, Upsher-Smith, to Mr. Ray Kapur.

1 Have you seen this document before?

2 A. I believe so, yes.

3 Q. Do you see the first paragraph where it says,
4 "Per your request to Ian Troup last week, I am writing
5 to confirm that Upsher-Smith Laboratories, Inc. has
6 suspended all research on Niacor-SR. There were
7 multiple reasons for this decision. First and
8 foremost, an additional multiple-dose pharmacokinetic
9 study was required prior to submitting an NDA. In
10 light of Niaspan's FDA approval, Upsher-Smith's NDA
11 would have been two to three years behind the launch of
12 Niaspan."

13 Do you see that?

14 A. I see the paragraph, yes.

15 Q. Is this -- do you know if this is the same
16 pharmacokinetic study that we were talking about back
17 in the spring of 1997?

18 A. No, I do not.

19 Q. Do you know if they had done any work, actual
20 work, on getting the pharmacokinetic studies done for
21 this drug?

22 A. Well, I never saw any reference to the study
23 being underway or finished. I did see reference to
24 planning the study.

25 Q. And that was in the Upsher-Smith documents you

1 said?

2 A. Yes.

3 Q. Do you know why Upsher-Smith waited until
4 October 6th, 1998 to tell Schering-Plough that an
5 additional multiple dose pharmacokinetic study was
6 required prior to submitting an NDA?

7 A. I don't know that they did. I don't know why.

8 Q. You haven't seen any references to Upsher-Smith
9 communicating to Schering prior to this date about the
10 pharmacokinetic study, have you?

11 A. Not that I can remember.

12 Q. Sitting here today, can you think of any reason
13 why Upsher-Smith wouldn't have completed its
14 pharmacokinetic studies if they were interested in
15 moving forward on Niacor-SR?

16 A. No, I believe they certainly could have if they
17 would have started them or at least for a period of
18 time. They are not long-term studies.

19 Q. Is intellectual property an area where a
20 pharmaceutical company will make inquiries before
21 licensing a late stage brand name drug?

22 A. Certainly a pharmaceutical company would want
23 to analyze what an intellectual property situation is.

24 Q. In your experience, have you ever been involved
25 in an in-licensing deal for a brand name -- late stage

1 brand name pharmaceutical where there was no review of
2 the intellectual property issues?

3 A. Well, as I just answered the previous question,
4 there's always a review. That review may be just to
5 say is there or is there not a patent. If there's no
6 patent position, the review doesn't take very long. It
7 takes five minutes. If there is a patent position,
8 then, of course, you would want to know how complex,
9 are there any problems with that patent position,
10 things like that. Then your review is going to be more
11 extensive and at one point in time maybe involve a
12 patent attorney.

13 Q. Do you know if Upsher-Smith did have a patent
14 position for its Niacor-SR product?

15 A. Well, they -- they had a patent on their
16 formulation with niacin; however, that patent could
17 have easily been gotten around by people with other
18 technology for SR, and I believe that Mr. Audibert just
19 assumed that they would not have any exclusivity for
20 that product, and that's how he did his analysis.

21 Q. Do you know if anyone from Schering made any
22 further inquiry besides Mr. Audibert's assumption
23 regarding the status of the intellectual property of
24 Upsher-Smith as it related to Niacor-SR?

25 A. No, I do not. I believe that some of the

1 material that Schering got from Upsher-Smith in the
2 beginning indicated that there was a patent, but I
3 don't know if there were any further inquiries.

4 MR. EISENSTAT: At this point, Your Honor, I'm
5 going to be discussing an in camera document.

6 JUDGE CHAPPELL: Okay, at this time I'll have
7 to ask the public to leave the courtroom. We are going
8 into in camera session. You will be notified when
9 you're free to enter the courtroom again. Thank you.

10 (The in camera testimony continued in Volume
11 16, Part 2, Pages 3877 through 3881, then resumed as
12 follows.)

13 BY MR. EISENSTAT:

14 Q. Dr. Horovitz, are you familiar with the term
15 "indications" with respect to a drug?

16 A. Yes.

17 Q. What are drug indications or what are a drug's
18 indications?

19 A. Indications describe what the drug can be
20 prescribed for, essentially what the Food and Drug
21 Administration allows in the labeling for the physician
22 to use the drug for.

23 Q. So, the indications actually appear on what
24 they call the labeling of the drug?

25 A. That's correct.

1 Q. Is the labeling the same thing as package
2 inserts?

3 A. The labeling is -- yes, the package insert
4 describes the labeling.

5 Q. Okay. And is the labeling for a drug submitted
6 to the FDA for approval?

7 A. That's correct.

8 Q. And sometime during the development of a late
9 stage drug, will the company developing the drug
10 typically write up draft labeling?

11 A. Yes.

12 Q. And in performing due diligence for
13 in-licensing of a pharmaceutical product, is looking at
14 the draft package inserts or labeling relevant?

15 A. If it's available. It depends on, you know,
16 the stage of the product and if a draft package insert
17 has been developed.

18 Q. And would you -- when you were doing
19 in-licensing, would you always ask if a draft labeling
20 had been done?

21 A. For latter stage products I believe.

22 Q. And the labeling would be important for
23 in-licensing a drug because you would look at it to
24 tell you what your salesmen could say about the drug.
25 Is that right?

1 A. Yes, that's correct. I mean, you can -- you
2 can -- you can guesstimate what the labeling will be
3 based on the data from the pivotal trials. The actual
4 draft labeling just puts that information in a form
5 that would be similar to a package insert.

6 Q. Do you know if anyone from Schering reviewed
7 Upsher-Smith's draft labeling for the Niacor-SR
8 product?

9 A. I do not know.

10 Q. Do you know if anyone from Schering even
11 inquired to see if there was draft labeling for the
12 Niacor-SR product?

13 A. No, I don't know.

14 Q. But that's something you would have done if you
15 had been in Schering's shoes, make the inquiry?

16 A. I would have asked if they had a draft label.

17 Q. And if they had it, you would have reviewed it?

18 A. Yes.

19 Q. Now, by June of 1997, Kos had submitted its NDA
20 to the FDA. Is that right?

21 A. I believe that's correct, yes.

22 Q. And when Schering was reviewing the Kos
23 product, Niaspan, Schering got a copy of that draft
24 labeling, didn't they?

25 A. I -- I don't know. Schering got some documents

1 describing the product, but whether the draft labeling
2 was included, I don't know.

3 Q. I'd like to show you what's been marked as
4 CX 540, and this is a document this time from
5 Schering-Plough's files.

6 A. Um-hum.

7 Q. The first page is a memo from Karin Gast to
8 Rudy Ress, copying a number of other people, dated
9 February 11th, 1997. Do you recall if you have ever
10 seen this document before?

11 A. I believe I have.

12 Q. And there are a number of attachments to the --
13 to this one-page memo that are listed there on the
14 front, and the second attachment reads on the front
15 page, "Proposed labeling, excluding the indications
16 section."

17 Do you see that?

18 A. Yes.

19 Q. And the second -- the next point says, "A
20 single page entitled Preliminary Labeling Indications,
21 which they believe are likely to be approved."

22 Do you see that?

23 A. Yes.

24 Q. Is this the kind of information you were
25 talking about when you said you'd look for draft

1 labeling and then review it if you could get it?

2 A. Well, certainly this product at this time was
3 very close to filing if it hadn't been filed already,
4 and -- and may have been by that time, and one would
5 expect if you file a product that you have proposed
6 labeling. That's part of the package.

7 Q. And this is what you would expect to see from a
8 company like Kos?

9 A. From a product that was at this stage, yes.
10 You would have to have the draft labeling, because you
11 had the NDA.

12 Q. And I direct -- well, let's stick with that
13 first page just for a minute more.

14 Do you see the bottom line of typed text on the
15 page, "Please distribute this material to the CV
16 Licensing group for review and discussion at the next
17 meeting (3/3/97)"?

18 Do you see that line?

19 A. Yes, I do.

20 Q. Do you know if Mr. Audibert was a member of the
21 CV licensing group?

22 A. I don't know.

23 Q. And let's turn to the page that bears the
24 number SP 002804. It's headed at the top Preliminary
25 Labeling Indications for Niaspan.

1 A. I have it.

2 Q. Do you have that page in front of you?

3 A. Yes.

4 Q. Do you see the fourth preliminary indication,
5 "Reduction of recurrent myocardial infarction (MI) in
6 patients with a history of MI"?

7 A. Yes.

8 Q. Do you know what myocardial infarction means?

9 A. Yes.

10 Q. And what is myocardial infarction?

11 A. Well, people use that for describing heart
12 attack. It's a -- an infarct is a damage to the heart
13 muscle, the myocardial.

14 Q. And do you know what it means for it to say,
15 "Reduction of recurrent myocardial infarction in
16 patients with a history of myocardial infarction"?

17 A. Yes, I believe in my initial testimony I
18 indicated that niacin had been shown to be successful
19 in preventing subsequent, I called it, recurrent
20 myocardial infarcts, and a number of large studies had
21 been done of niacin and other drugs and placebo to
22 indicate if you took niacin, you would have less chance
23 of having a subsequent infarct.

24 Q. And Kos was able to rely on those studies to
25 seek to get this preliminary --

1 A. Yes, I believe that their labeling now includes
2 that phrase -- it's really given by the FDA as an
3 indication for niacin and is part of what we call class
4 labeling. Any niacin product that gets approved would
5 have that labeling.

6 Q. And do you see the fifth preliminary labeling
7 indication, "Slowing progressive --" and I don't know
8 how to pronounce that word --

9 A. Arteriosclerotic.

10 Q. " -- arteriosclerotic disease in patients with
11 a history of coronary artery disease when used in
12 combination with bile binding resins."

13 Is this another one of those things you called
14 a class label?

15 A. I believe that would have been a class
16 labeling, yes.

17 Q. And what is arteriosclerotic disease?

18 A. It's the plaque build-up, what people know as
19 plaque, the build-up of lipids and other factors in the
20 arteries to prevent blood flow.

21 Q. And do you know whether by June 1997 Upsher had
22 done any draft labeling for Niacor-SR?

23 A. No, I don't know. I did eventually see a draft
24 label, but I can't remember the timing.

25 Q. And let me show you what has been marked

1 CX 976, again a document from the files of Upsher-Smith
2 that's been admitted into evidence.

3 The first page of this is an interoffice
4 memorandum from Lori Freeze to Phil Dritsas and Mike
5 Kirshen. Do you see that?

6 A. Yes.

7 Q. With carbon copies to Denise Dolan and Jim
8 Maahs. Do you see that?

9 A. Yes.

10 Q. The first sentence says, "I have attached a
11 copy of the most recent draft of the Niacor-SR package
12 insert."

13 Do you see that?

14 A. Yes.

15 Q. And that would be the draft of the labeling?

16 A. Yes.

17 Q. And the third paragraph on the page says,
18 "Please review the information in this draft package
19 insert and give me your comments so we can incorporate
20 them into the final insert."

21 Do you see that?

22 A. Yes, I do.

23 Q. Have you ever seen this before?

24 A. I don't know if I saw this cover memo, but I
25 believe I did see a package insert draft of Niacor-SR.

1 Whether it was this draft or a subsequent one, I'm not
2 sure unless I get to study it for a while.

3 Q. Do you know if there was a subsequent one to
4 this one before the Schering license deal was entered
5 into?

6 A. A?

7 Q. A subsequent draft package insert.

8 A. After this one?

9 Q. After this one, before the --

10 A. I would doubt it, because this is about the
11 same time.

12 Q. Well, this is June of '96.

13 A. Oh, '96, I'm sorry. Before June of '97?

14 Q. I didn't see one, but I didn't know if you --

15 A. I -- I remember seeing one, and I remember it
16 as a kind of different format, but whether it
17 changed -- most companies will update this as they get
18 more information. So, when they -- when Upsher-Smith
19 did their update, I just don't know.

20 Q. Could you turn to the page bearing the number
21 1003785, and I apologize, the numbers are very small.

22 A. Yeah, I can see it. Okay, it starts,
23 "Indications and Usage"?

24 Q. "Indications and Usage," yes. Can you look
25 through that section and see if you see any indication

1 for the reduction of recurrent myocardial infarction or
2 the slowing of progressive arterio --

3 A. Arteriosclerotic.

4 Q. -- arteriosclerotic disease?

5 A. I don't see it on this page.

6 Q. And do you see it on the subsequent page? I
7 think it continues on the next page.

8 A. No, I do not. They seem to be focusing at this
9 point anyway just on cholesterol.

10 Q. Would a -- do you know whether a sustained
11 release niacin product that had an indication for
12 reduction of recurrent myocardial infarction in
13 patients with a history of myocardial infarction,
14 whether a sustained release niacin product with that
15 indication would have a competitive advantage in the
16 marketplace over a sustained release niacin product
17 that did not have such an indication?

18 A. Well, that's a hypothetical question,
19 because --

20 Q. Yes.

21 A. -- I don't think that will ever happen, but if
22 it did, if for some reason there wasn't class labeling
23 anymore, then it might have an advantage.

24 Q. That is, that the drug that had that
25 indication --

1 A. Had the indication, right.

2 Q. Would the same thing be true for the arterio --

3 A. Arteriosclerotic plaque?

4 Q. Yes.

5 A. Yes, if that ever happened.

6 Q. Do you know whether, in fact, Upsher-Smith
7 qualified to get that class labeling?

8 A. If they would have filed their NDA, I believe
9 they would have got that class labeling, yeah.

10 Q. Did you read the deposition of Mark Halvorsen
11 taken in this proceeding?

12 A. I believe so, yes.

13 Q. Let me show you what's been marked as CX 1688,
14 which is two pages taken from that deposition. Let's
15 start on the page -- page number 168. Do you see the
16 question and answer at the top:

17 "QUESTION: Do you know why it was decided to
18 stop work on the NDA for Niacor-SR?

19 "ANSWER: Personally I don't know what the
20 overall reason was for Upsher-Smith as a whole. There
21 were multiple discussions regarding advantages and
22 disadvantages."

23 Do you see that section?

24 A. I see it, um-hum.

25 Q. Let's turn to the next page then, the page that

1 starts with the examination by Ms. Bokat.

2 "QUESTION: What were the disadvantages?

3 "ANSWER: One is that we could not match the --
4 all of the package insert indications that Kos had for
5 their product.

6 "QUESTION: What package insert indications
7 could Upsher-Smith not match?

8 "ANSWER: I group them in three categories.
9 One is the lipid parameters. As I stated earlier, I
10 believe we were equivalent to Kos' lipid parameters.

11 "The second indication they have is a reduction
12 in myocardial infarctions. The third is for halting
13 progression or actual regression of atherosclerosis.
14 It's the second and third that Upsher-Smith did not
15 collect information in their Niacor-SR protocols to be
16 able to get those indications."

17 Do you see that?

18 A. Yes, I do.

19 Q. Does that indicate that had Niacor-SR reached
20 the marketplace, it would have been at a competitive
21 disadvantage to Kos, who was able to have those two?

22 A. No, I think it indicates some naivete of Mr.
23 Halvorsen in the RX area of drugs. He was primarily
24 used to over-the-counter drugs at Upsher-Smith, and
25 that if Kos got these indications, which they did, they

1 got them without doing any of their own studies in this
2 area. They got them from literature, and there was no
3 reason why Niacor wouldn't get the same --

4 Q. Even if they didn't collect the information to
5 get those same indications?

6 A. Even if they didn't collect the information, I
7 said I would be very surprised -- in fact, I would be
8 amazed if Kos collected this information. All you have
9 to do is cite to the references and you get the class
10 labeling.

11 (Pause in the proceedings.)

12 BY MR. EISENSTAT:

13 Q. I'd like to hand you what's been marked as
14 CX 574, and this is a letter from Cecil C. Schmidt
15 to -- of the law firm of Merchant & Gould to Peter
16 Mansa of Jenkins & Gilchrest dated August 19th, '97,
17 and handwritten on the first page is "CC: Ian Troup,
18 Vicki O'Neill."

19 A. Yes.

20 Q. Have you ever seen this document before?

21 A. I'm not 100 percent sure, but I think I may
22 have seen it.

23 Q. Do you know what the document is in reference
24 to?

25 A. I believe it's referring to an analysis on

1 patent --

2 Q. It's about the patent cross-license agreement?

3 A. It -- I believe so, yes. I'm not sure who the
4 principals of the memo are or who's writing who, but --
5 but yes, I believe that's the case.

6 Q. For the sake of this question, let me ask you
7 just to assume that Cecil Schmidt is representing
8 Upsher-Smith and Peter Mansa is representing Kos
9 Pharmaceuticals.

10 A. Okay.

11 Q. Do you see the paragraph that says, "As you
12 know from our discussions, I've advised my client as
13 follows: One, with regard to co-marketing and similar
14 relationships, they are free to manufacture and sell a
15 multiple dose niacin product and they are free to sell
16 a once-a-day niacin product which is not indicated for
17 use in the evening or at night."

18 Do you see that?

19 A. Yes, I do.

20 Q. And it says, "They are free to market worldwide
21 a once-a-day, at-night product so long as this is not
22 through a co-marketing arrangement, i.e., it is on
23 their own."

24 Do you know if that would apply to the license
25 agreement that Upsher-Smith signed with Schering?

1 A. No, because I don't know if this refers to U.S.
2 or what countries it refers to. Obviously the analysis
3 should be done for the territories that Schering was
4 licensed for, and this letter doesn't tell me that.

5 Q. Well, under 2, it does say they're free to
6 market worldwide a once-a-day, at-night product, so
7 long as it is not through co-marketing arrangements,
8 i.e., it is on their own.

9 Do you see that?

10 A. Yes, but that doesn't say that they can't
11 sublicense in other countries for that usage. I mean,
12 this letter doesn't indicate whether his analysis was
13 U.S., Europe, Japan or anywhere.

14 Q. If this letter covered Europe, would that
15 affect the Upsher-Smith/Schering deal?

16 A. It would -- it could possibly affect them with
17 their labeling, the at night, yes.

18 Q. If this did affect the European deal, would it
19 preclude Schering from making a once-a-day, at-night
20 claim?

21 A. If they had patents in the countries that
22 Schering would market that covered a niacin SR to be
23 used at night, then that probably would be precluded.
24 Those are very tough patents to get in overseas
25 countries, and I seriously doubt whether they got them,

1 but it's possible.

2 Q. Sure. Could you turn to the next page of the
3 document?

4 A. The last page?

5 Q. The last page, and the top paragraph says,
6 "Based upon my discussions with my client, it is my
7 present belief that they are unlikely to proceed with
8 any of the current co-marketing opportunities, but
9 rather, will proceed in due course with their own
10 once-a-day, at-night product."

11 Do you know what that refers to?

12 A. No.

13 Q. Do you know if that refers to the arrangement
14 between Upsher-Smith and Schering?

15 A. No, I -- I don't know. At the date of this
16 document, they already had concluded their deal.

17 Q. Right, they had already signed a deal with
18 Schering at the date of this document.

19 A. Right, correct. And that may, once again, have
20 just referred to the U.S.

21 Q. What's the purpose of an up-front payment in a
22 licensing deal?

23 A. Well, there are many reasons for an up-front
24 payment. One is for the licensor to get a return for
25 its investment in bringing the product to the stage

1 where it's going to license it. That's one major
2 reason, but it depends on, of course, the licensor and
3 his objectives.

4 Q. And you're aware that Schering made all three
5 payments totaling \$60 million to Upsher-Smith?

6 A. I'm aware it made the first one, and I assume
7 contractually it was responsible for the other two and
8 it did that, but I don't know for a fact.

9 Q. Well, let's just make sure that we've all got
10 that. Let me show you what has been marked as CX 1689.
11 This is a copy -- this is the public version of
12 Respondent Schering-Plough Corporation's Objections and
13 Responses to Complaint Counsel's Revised Second Request
14 for Admissions filed in this case.

15 I'd like you to turn to page 8, and I direct
16 your attention to request 73, which reads, "Schering
17 made a payment of \$28 million to Upsher within 48 hours
18 of the date on which the Schering-Upsher Agreement was
19 approved by Schering's Board of Directors.

20 "ANSWER: Admitted."

21 Do you see that?

22 A. Yes. Now, the answer is from Schering?

23 Q. Yes, the answer is from Schering.

24 A. I see that.

25 Q. The requests are from complaint counsel and the

1 answers are from Schering.

2 A. I understand.

3 Q. Request number 74 says, "Schering made a
4 payment of \$20 million to Upsher approximately one year
5 from the date on which the Schering-Upsher agreement
6 was approved by Schering board of directors.

7 "ANSWER: Admitted."

8 Do you see that?

9 A. Yes.

10 Q. And request number 75, "Schering made a payment
11 of \$12 million to Upsher approximately two years from
12 the date on which the Schering-Upsher Agreement was
13 approved by Schering's Board of Directors.

14 "ANSWER: Admitted."

15 Do you see that?

16 A. I see that. So, this answer is saying that
17 Schering did make all three payments.

18 Q. Yes. Do you know how much Upsher-Smith
19 invested in their product?

20 A. I saw I believe in Mr. Troup's deposition a
21 reference to at the time they started talking that they
22 had spent up to \$14 million. Of course, they were
23 going to have to spend more to get the final documents
24 in order for Schering to proceed. So -- and I saw some
25 project team meetings that I did try to do analysis of

1 the project team meetings, on what they intended to
2 spend on getting the documents to that point, and it
3 looked like they would be spending a total of about \$18
4 to \$20 million.

5 Q. And would you say \$60 million was a fair return
6 on that investment?

7 A. Well, they're going to want more than what they
8 spent, because spending \$20 million on Niacor-SR
9 prevented them from spending \$20 million on something
10 else. It's an opportunity cost, again. So, they're
11 going to want some premium over what they spent.

12 Q. Would you consider \$60 million for \$20 million
13 investment a fair return for what they spent?

14 A. I would consider it what was negotiated, and if
15 the two parties felt it was a fair up-front return,
16 then I think there was nothing wrong with it.

17 Q. If you were looking for a licensing
18 opportunity, a late stage drug licensing opportunity,
19 for a drug to be marketed in Europe, would you check
20 with the general managers at some of the key markets to
21 see if there were any issues that you had missed?

22 A. Yes.

23 Q. You're aware, are you not, that Upsher-Smith
24 had been looking to find a European marketing partner
25 for Niacor-SR in 1977 (sic)?

1 A. I remember seeing a few documents that related
2 to them contacting some companies in Europe.

3 Q. Do you know that they hired a company called
4 Moreton located in England to help them find a European
5 partner?

6 A. I saw reference to that.

7 Q. And Moreton filed periodic reports with
8 Upsher-Smith on how it was doing?

9 A. I'm not sure I saw those, but I would assume
10 they would have.

11 Q. Are you aware that Moreton contacted
12 Schering-Plough Limited, a subsidiary of
13 Schering-Plough, and Schering-Plough Limited expressed
14 no interest in the Niacor-SR product?

15 A. No, but it wouldn't surprise me that they
16 contacted Schering.

17 Q. Let me hand you what's been marked as CX 839.
18 Again, this is a document from the files of
19 Upsher-Smith Laboratories, and it's been admitted into
20 evidence.

21 Have you ever seen this document before?

22 A. I -- I'm not sure. I may have.

23 Q. Let me direct your attention to the second page
24 of the document. Do you see the listing for
25 Schering-Plough Limited?

1 A. Yes.

2 Q. And it says, "Verbally advised as not of
3 interest on 31/1/97"?

4 A. I see that.

5 Q. Had you been in Schering-Plough's shoes in
6 1997, would you have contacted Schering-Plough Limited
7 in order to see why they were not interested in
8 Niacor-SR?

9 A. Possibly not, and I can tell you the reason.

10 Q. Okay.

11 A. The reason is in drugs that have big strategic
12 value to companies, and I had this experience a number
13 of times at Bristol and Squibb, the corporate powers to
14 be have to make decisions sometimes without the local
15 operations, the reason being that the local operations
16 are much more interested in their quarter-to-quarter
17 P&Ls and hesitate to take on new products a lot of
18 times.

19 Secondly, it was an area in cardiovascular that
20 Schering overseas was not really into. So, I could see
21 the heads of some of the European countries being
22 resistant to this product, and I had many instances
23 where I was told by the president of the pharmaceutical
24 group that -- just ignore or don't ask the European
25 managers, because this is so important strategically

1 that we have to make it here.

2 Q. But if you were looking for a licensing
3 opportunity, a late stage drug licensing opportunity,
4 for a drug to be marketed in Europe, wouldn't you be
5 concerned that if you didn't check with the general
6 managers of some of the key markets, there might be
7 some issues you missed?

8 A. Well, I believe in this case that Mr. Audibert
9 had sent a questionnaire to the -- many of the country
10 managers on Niaspan before they dropped interest in
11 Niaspan. So, the issues raised from that question
12 probably would be exactly the same as the issues for a
13 Niacor are.

14 Q. Did you ever see any responses to that
15 questionnaire?

16 A. No, I just saw the questionnaire.

17 Q. Do you know if Schering-Plough Limited
18 responded to that questionnaire?

19 A. I do not.

20 Q. Knowing that Schering-Plough Limited had
21 verbally advised Moreton that they were not interested
22 in Niacor-SR, wouldn't you be concerned that you might
23 be missing something as to not talk to them with
24 respect to why they were turning the deal down?

25 A. If strategically I was told we need this drug,

1 then I probably would have kept that as a very low
2 priority thing to do.

3 Q. Do you know if Mr. Audibert was told
4 strategically, we need this drug?

5 A. I only know that they -- there are memos
6 indicating that strategically Schering wanted to get
7 into the cholesterol area, and this was one
8 possibility, yes.

9 Q. Do you know if Mr. Audibert was ever told that
10 strategically they needed this drug?

11 A. Only that I know he probably read some of those
12 memos, but I don't know whether he was told directly.
13 I wasn't there.

14 Q. How do you know he read those memos?

15 A. Some of them I believe he was copied on. I
16 assume he read them, I'm sorry.

17 Q. But in order for the drug to be a -- this is
18 about being a lead-in to the ezetimibe product. Is
19 that right?

20 A. Correct, yes.

21 Q. Now, in order to be a lead-in to the ezetimibe
22 product, you actually have to get the Niacor-SR on the
23 market, right?

24 A. That's correct.

25 Q. I mean, they licensed Niacor-SR, right?

1 A. Who, Schering?

2 Q. Schering.

3 A. Yeah, to get it on the market.

4 Q. And they never did get it on the market, did
5 they?

6 A. That's what happened retrospectively.

7 Q. So, it was not useful as a lead-in, right --

8 A. As it turned out.

9 Q. -- to ezetimibe?

10 A. It wasn't.

11 Q. So, wouldn't you want to know if there was some
12 reason that Schering-Plough Limited turned it down that
13 would prevent it from getting on the market and prevent
14 it from being a lead-in to ezetimibe?

15 A. I said that that would not be a high priority
16 for me knowing the thinking of the European managers,
17 at least in my experience. That doesn't say if I saw
18 or talked to the head of Schering -- I guess that was
19 UK, I might not have asked them, but I would have given
20 him the opportunity to say no.

21 Q. Not all drugs do well overseas even if they're
22 marketed in the United States. Isn't that fair?

23 A. That's true. Some do better, some don't.

24 Q. Did you do any independent investigation of the
25 likelihood of a successful sustained release niacin

1 product being marketed in Europe?

2 A. I'm not sure what you mean by "independent
3 evaluation." I did not do an extended evaluation.

4 Q. Did you talk to anybody in Europe about it?

5 A. No.

6 Q. Did you read the testimony of Mr. Bell of Kos
7 Pharmaceuticals?

8 A. I don't believe so, no.

9 Q. Did you read the testimony of Mr. Patel at Kos
10 Pharmaceuticals?

11 A. No.

12 Q. I'd like to hand you a document that's marked
13 CX 36, and this is not a document from either Upsher's
14 files or Schering's files. This is a document that I
15 downloaded a few months ago off of the -- Schering's
16 web page, and it has been admitted into evidence, and
17 it shows cardiovascular product sales for a number of
18 products for 2000 and 2001.

19 Do you see that?

20 A. Yes.

21 Q. And are you familiar with the product K-Dur?

22 A. Well, I know it's a potassium product. I don't
23 know much about it.

24 Q. Are you aware it was the subject of the patent
25 litigation between Schering and Upsher-Smith?

1 A. I believe I knew that, yes.

2 Q. Okay. Now, according to this document, in the
3 year 2000, there were approximately \$287 million in
4 sales of K-Dur in the United States. Do you see that?

5 A. I see that.

6 Q. And there were only \$3 million worth of sales
7 of K-Dur internationally, excluding the United States.
8 Do you see that?

9 A. Correct.

10 Q. Do you know why K-Dur would sell well in the
11 United States and not overseas?

12 A. Well, there may be many reasons. I'm not sure
13 I'm familiar enough with the product to know exactly
14 why. I believe K-Dur is an RX product that doesn't
15 have a lot of competition yet in the U.S., but I don't
16 know the situation in the overseas market.

17 Q. How do you know Niacor-SR wouldn't turn out to
18 be just like K-Dur, where it was successful in the
19 United States and not successful overseas?

20 A. What I know, it really didn't matter in this
21 deal. It's what was projected by the Schering experts
22 for their company, and that's what was important.

23 Q. But you have no basis for making an independent
24 determination of that. Is that fair?

25 A. Correct. I probably should add that I imagine

1 there's a big price difference, so that volume might be
2 different than comparing sales.

3 Q. Now, did you see any indication in the
4 documents you went through that Upsher-Smith ever
5 completed putting together the results of its two
6 pivotal studies to give Schering?

7 A. Schering got results from one study, I believe
8 the 115. The 221, they got summary data, but I never
9 saw that they ever received the final report.

10 Q. Do you know why they never received the final
11 report?

12 A. No, I do not.

13 Q. I have a question about CX 1042, which is tab 1
14 of your notebook.

15 A. Um-hum.

16 Q. Do you have your notebook?

17 A. Yes, I have it.

18 Q. And my question is about the page that you
19 referred to this morning, SP 1600079.

20 A. 79?

21 Q. Yes.

22 A. Okay.

23 Q. Now, the final study report is -- if I'm
24 reading this correct, the one protocol, 920115, the
25 final study report was complete. Is that right?

1 A. At the date this was put together, yes.

2 Q. Okay. Do you know when this was put together?

3 A. No. I know Schering got it early in June, but
4 I don't know when --

5 Q. So, it was put together before early June?

6 A. Sometime before.

7 Q. Do you know when actually Schering got these
8 documents and started their analysis?

9 A. No. I think the final study reports from 115
10 and 221 are summarized in this document. I think
11 they -- Schering was waiting for the integrated
12 summaries, which were due in October, because the
13 integrated summaries pull together all the data and
14 make it easier for a filing document and easier to
15 submit than the individual ones.

16 Q. When you say integrated summary, is that the
17 document that is ISS/ISE?

18 A. That's right.

19 Q. That's the integrated --

20 A. Integrated safety and efficacy summary.

21 Q. And so that would be an integration of both
22 studies?

23 A. All the data essentially they had at that time.

24 Q. And that was scheduled for October 1997.

25 A. Correct.

1 Q. When -- do you know when Schering stopped
2 working on this project?

3 A. No, not for sure, but I -- as I went through
4 some of the documentation, it appeared that they slowed
5 down at least or lost interest in the spring of '98.

6 Q. Schering lost interest in the spring of '98?

7 A. Well, they weren't getting information. So, at
8 least there were no documents that I saw after that.

9 Q. And that was before the second payment to
10 Upsher-Smith. Is that right?

11 A. I imagine it would be, yes.

12 Q. Let me show you a document that's marked
13 CX 1683. This is a document from the files of
14 Upsher-Smith. This is not in evidence, but this was
15 shown to Dr. Levy during his cross examination.

16 Have you ever seen this document before?

17 A. I don't remember it.

18 Q. Have you ever seen --

19 A. It's possible.

20 Q. -- have you ever seen documents from Clintrials
21 Research, Inc.?

22 A. I saw documents indicating Clintrials Research
23 was a CRO, contract organization working for
24 Upsher-Smith.

25 Q. Okay. And this is -- if you'd turn to the

1 second page, it bears the number 093789.

2 A. Correct.

3 Q. Do you see the numbers of the protocols listed?

4 A. Yes.

5 Q. And these are the protocols that relate to
6 Niacor-SR. Is that right?

7 A. That's correct, the 115 and 221 were the
8 pivotal studies.

9 Q. And 994 is one of the continuation studies?

10 A. I believe so, yes.

11 Q. And 837 is the other continuation study?

12 A. I believe so.

13 Q. And then it also talks about the ISS, and
14 that's the integrated study for 115 and 221?

15 A. I -- you'll have to point that out to me.

16 Q. I'm sorry, on the third page. I apologize.

17 A. The last page -- oh, yes, number -- Roman
18 numeral IV on the last page.

19 Q. Yes, Roman numeral IV, ISS.

20 A. Yeah.

21 Q. And that's the integrated study you were
22 talking about?

23 A. Right.

24 Q. And this document is dated in March of '98. Do
25 you see the line in there that says, "USL's European

1 partner has decided not to proceed with the drug"?

2 A. Yes.

3 Q. Do you know what that's about?

4 A. No idea.

5 Q. Do you know if Upsher-Smith -- if Schering had
6 decided not to proceed with the drug by March of
7 1997 -- 1998?

8 A. March of '98? No, I saw no reference to that.

9 Q. You just don't know what that refers to?

10 A. No.

11 Q. At least by the fall, though, 1998, Upsher had
12 told Schering they weren't going to continue working on
13 the drug. Is that right?

14 A. Yes, that's correct.

15 Q. And at least one payment was then made after
16 that time from Schering to Upsher. Is that right?

17 A. That would be the final payment.

18 Q. Yes.

19 A. I believe that's afterwards, yes.

20 Q. And these payments, because they were
21 noncontingent payments, Upsher-Smith was not obligated
22 to use the money they got from Schering to complete the
23 research on Niacor-SR. Is that right?

24 A. That's correct.

25 Q. Had the agreement between Upsher and Schering

1 instead called for some portion of that money, that \$60
2 million, to be used to fund research to complete the
3 Niacor-SR studies and to prepare reports, then Schering
4 would have had some assurance that the money would have
5 been used for that purpose. Is that right?

6 A. That's a complex question. If the agreement
7 had stated -- let's see if I can repeat your
8 question -- if the agreement had stated that
9 Upsher-Smith was required to use the actual money that
10 Schering was paying them to -- for -- only for
11 Niacor-SR, yes, they would have to do work on Niacor-SR
12 or not take the money, but the agreement did not state
13 that.

14 Q. Right. You had mentioned a minute ago that Mr.
15 Audibert had sent out a survey to the European
16 companies' --

17 A. Managers.

18 Q. -- managers. Do you remember that?

19 A. Yes.

20 Q. Have you seen that survey?

21 A. I believe I did, yeah.

22 Q. Let me show you what's been marked as CX 544,
23 and this is a document that came from Schering-Plough.

24 Is this the survey that you recall seeing?

25 A. I think so, yes.

1 Q. Do you see the third paragraph on the page --
2 first of all, your understanding is this survey is
3 about the Niaspan product, right?

4 A. That's correct.

5 Q. And the third paragraph, do you see the last
6 line where it says, "It could be on the European market
7 by mid 1998"?

8 A. Yes.

9 Q. Is that consistent with the entry date of
10 competition that Mr. Audibert used in his commercial
11 assessment of Niacor-SR?

12 A. No, it is not.

13 MR. EISENSTAT: May I have a moment, Your
14 Honor?

15 JUDGE CHAPPELL: Yes.

16 (Counsel conferring.)

17 BY MR. EISENSTAT:

18 Q. In your direct examination, you talked about
19 the commercial opportunity that a sustained release
20 niacin offered in 1997. Do you remember that?

21 A. Yes.

22 Q. Are you aware that Niaspan's sales have now
23 reached \$100 million in the United States?

24 A. Last year, I believe that's correct.

25 Q. Do you know why Niaspan has not been able to

1 find a marketing partner in Europe or Kos has not been
2 able to find a marketing partner for Niaspan?

3 A. No, I just don't know. They may not have tried
4 or they may have been asking for terms that were too
5 rough. I don't know.

6 Q. Did you read any of the documents produced in
7 this case from companies in Europe that rejected the
8 Kos product?

9 A. I remember seeing a few documents from European
10 companies. One was from a company that had indicated
11 some interest, I think, in the product, Pierre Fabre I
12 think. I don't know that I read much on company -- on
13 reasons that companies rejected it.

14 Q. But you don't know why they haven't been able
15 to find a partner yet in Europe?

16 A. Kos?

17 Q. Kos.

18 A. I have no idea that they're trying.

19 Q. Do you know if their product is approved in any
20 European countries?

21 A. There may be one country that it's approved in,
22 but I don't remember. It certainly isn't approved
23 in -- broadly in overseas countries that I know of.

24 Q. In your notebook, you referred this morning to
25 a document labeled SPX 235. Do you recall that?

1 A. Yes.

2 Q. Do you know who wrote that document?

3 A. No, I don't think so. It was -- I saw it as a
4 separate document, and just -- I assumed it came from
5 Upsher-Smith, but I'm not even sure about that.

6 Q. The document on the first page bears the date
7 23 June 1997. Do you see that?

8 A. I see that.

9 Q. That date is after Mr. Audibert completed his
10 commercial assessment. Is that correct?

11 A. I believe that's correct. It's after that but
12 before the Schering board approved it, yes.

13 Q. Do you know of any evidence that would indicate
14 the Schering board saw this document?

15 A. I don't know.

16 Q. Did you read any of the depositions of the
17 Schering board members taken in this case?

18 A. No, I did not.

19 Q. Did you see the memorandum sent to the Schering
20 board members prior to the meeting concerning this
21 matter?

22 A. Yes, I did.

23 Q. Let me show you what's been marked as CX 338,
24 and again, this is a document from the files of
25 Schering-Plough that has been admitted into evidence in

1 this case.

2 A. Yes, I believe I've seen this document.

3 Q. When you saw this document, did you see any
4 mention of the product ezetimibe in here?

5 A. I don't remember. I'd have to look through it.
6 I -- it pretty well just describes the deal for
7 Niacor-SR and some background on cholesterol-lowering
8 products.

9 Q. You don't see any reference to ezetimibe?

10 A. No, although I would think the Schering board
11 would know all about ezetimibe at this point in time.
12 I can't find, just skimming it, any reference.

13 Q. But you didn't read the board of directors'
14 depositions?

15 A. No, I did not.

16 Q. When you talked about a strategic value to a
17 product, you talked about the use of -- the possible
18 use of Niacor-SR as an entre into the cardiovascular
19 area for Schering for ezetimibe. Is that right?

20 A. Well, the cardiovascular area, specifically the
21 lowering of cholesterol area, correct.

22 Q. Could another strategic value be -- for
23 entering into this licensing agreement with
24 Upsher-Smith be to get Upsher-Smith to settle their
25 patent lawsuit and protect the position of the K-Dur

1 product in the marketplace?

2 A. I would have no way of commenting on that. I
3 saw --

4 MR. GIDLEY: Objection, Your Honor. The
5 question is vague and calls for speculation by this
6 witness and lack of foundation.

7 JUDGE CHAPPELL: I'll overrule it to the extent
8 he has knowledge and can answer it.

9 THE WITNESS: I saw no documentation speaking
10 to this issue at all at that time, and I'd have no way
11 of making that judgment. I guess I can also add that
12 looking at the deal the way I did and with all the
13 information I have, it was a reasonable deal for
14 Schering to do based on the economics, and that's a
15 certainly good enough reason to do the deal.

16 BY MR. EISENSTAT:

17 Q. Now, you said you saw the memo that was sent to
18 the board of directors, CX 338. Is that right?

19 A. Yes.

20 Q. I'd ask you to turn to the page marked SP
21 1200270.

22 A. Yes.

23 Q. Do you see under Payment Terms the memo reads,
24 "In the course of our discussions with Upsher-Smith
25 they indicated that a prerequisite to any deal would be

1 to provide them with a guaranteed income stream for the
2 next twenty-four months to make up for the income that
3 they had projected to earn from sales of Klor Con had
4 they been successful in their suit."

5 Do you see that?

6 A. I see that sentence, yes.

7 Q. And you're aware that the Klor Con product is
8 the generic version of the K-Dur product?

9 A. I believe so, yes.

10 Q. Reading that sentence again, let me ask the
11 question, could settling the patent suit be a strategic
12 value for Schering in accepting this license deal?

13 A. Well, I -- I have a hard time answering that,
14 because I don't know any of the background, and the
15 fact that Upsher-Smith wants something doesn't mean
16 that Schering has to give it to them for that reason.
17 So, I can't really answer your question.

18 MR. EISENSTAT: I have no more questions, Your
19 Honor.

20 JUDGE CHAPPELL: Redirect?

21 MR. RAOFIELD: Yes, Your Honor. I don't know
22 if now would be a good time to take the mid-afternoon
23 break --

24 JUDGE CHAPPELL: No, we are going to finish
25 this witness.

1 REDIRECT EXAMINATION

2 BY MR. RAOFIELD:

3 Q. Dr. Horovitz, I'm going to begin where
4 complaint counsel just ended with the Schering board of
5 directors document that he was just talking to you
6 about.

7 A. 338?

8 Q. Yes, where he read to you a sentence from that
9 document but didn't read you another part that I'd like
10 you to take a look at. It's on SP 120268.

11 A. Um-hum.

12 Q. And it's the second paragraph that begins with,
13 "In connection with settlement discussions."

14 Do you see that paragraph?

15 A. Yes.

16 Q. And do you see the last sentence there,
17 "Upsher-Smith also informed us that they were beginning
18 to search for a partner to register and market these
19 four products outside of the United States, Canada and
20 Mexico"? Then there's a section that's been redacted,
21 and it says, "we informed them that any such deal
22 should stand on its own merit independent of the
23 settlement."

24 Do you see that language?

25 A. I see that.

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1 Q. Now, complaint counsel asked you if this
2 document was consistent with supporting the proposition
3 that Schering was gaining a strategic advantage in
4 settling the patent suit. Was that sentence
5 inconsistent with that theory?

6 A. That sentence would indicate that Schering was
7 looking at this deal just for the economics of the
8 Niacor-SR deal, yes, at least that's what they were
9 saying.

10 Q. And Dr. Horovitz, do you have an opinion,
11 having reviewed all the information that you've relied
12 upon in forming your opinions, as to whether or not the
13 deal for Niacor-SR did stand on its own two feet?

14 A. Yes, I believe I said that a number of times,
15 that the economics of that deal based on their
16 protections and knowledge -- projections and knowledge
17 at that time would make the Niacor-SR deal a good one
18 for Schering and would stand on its own two feet.

19 JUDGE CHAPPELL: Doctor, I need you to listen
20 to the question. That question required a yes or no
21 answer.

22 THE WITNESS: I'm sorry.

23 JUDGE CHAPPELL: You may proceed.

24 MR. RAOFIELD: Thank you, Your Honor.

25 BY MR. RAOFIELD:

1 Q. You can put that document aside, Dr. Horovitz.

2 I am going to turn your attention to the
3 binder, the document SPX 235, and on this document I
4 believe -- I wasn't sure I heard correctly, but I
5 believe you testified that you had seen this document
6 and you weren't sure but it may have been produced by
7 Upsher.

8 A. Correct.

9 Q. Now, I want to direct your attention to the
10 bottom of SP 160003.

11 A. Yes.

12 Q. If I can zoom in on this.

13 Now, the prior pages of this document have it
14 dated as June 23, 1997, correct?

15 A. They're all dated that, I think.

16 Q. And this page appears to have -- this is
17 directly below the section that you had talked about in
18 your direct testimony --

19 A. Oh, yes.

20 Q. -- about the strategic value with ezetimibe.

21 A. Yes.

22 Q. And do you see where it says, "Kapur," seems to
23 have a file name?

24 A. Yes.

25 Q. And it says "Kapur."

1 Are you familiar with who Mr. Kapur is?

2 A. Yes, he was the president of Warrick Labs,
3 which is a wholly-owned subsidiary of Schering.

4 Q. Of Schering. We're done with that document.

5 A. All right.

6 Q. The next document I'll ask you to take a look
7 at that complaint counsel questioned you about was the
8 March 14th, 1997 -- it's labeled at the very bottom
9 right CX 544, and you may be able to just look on your
10 screen.

11 A. I have it, I have it.

12 Q. Okay. And complaint counsel showed you the
13 sentence that I'm putting up here by Mr. Audibert when
14 he was asking the subsidiaries the question about
15 Niaspan. "It could be on the European market by mid
16 1998."

17 A. I see that.

18 Q. And do you remember being asked about this a
19 moment ago?

20 A. Yes.

21 Q. Now, complaint counsel asked you if this was
22 inconsistent with Mr. Audibert's assumption in June of
23 1997 that Kos -- that Kos would -- or another
24 competitor would enter the market in 2002.

25 A. Correct.

1 Q. Do you remember that?

2 As you read this document, does -- is this
3 document consistent with Mr. Audibert's assumption at
4 this time that Schering enters into a co-marketing
5 arrangement or other deal with Niaspan -- with Kos for
6 Niaspan?

7 MR. EISENSTAT: Objection, Your Honor, it's
8 leading.

9 JUDGE CHAPPELL: Overruled. He didn't suggest
10 an answer.

11 You may answer it, Mr. -- or Doctor, sorry.

12 THE WITNESS: Thank you.

13 Well, there were documents I saw that Kos was
14 saying the product could be on the European market in
15 six months; however, I believe those same documents
16 indicated that they didn't have any plans to move ahead
17 in Europe because they were concentrating only on the
18 U.S. market at that time.

19 BY MR. RAOFIELD:

20 Q. And with respect to this document, which was
21 sent by Mr. Audibert on March 14th, 1997, what is your
22 understanding of the purpose of Mr. Audibert's memo?

23 A. Well, it was to solicit input from the
24 operations on a niacin SR product, going into questions
25 on reimbursement, possible sales, level of interest, et

1 cetera.

2 Q. And this was as part of Mr. Audibert's
3 involvement with the evaluation of the niacin product
4 should Schering enter into an agreement with --

5 A. An agreement for overseas markets, yes.

6 Q. Do you know if in June of 1997, when Mr.
7 Audibert made his assumption that competition would
8 enter in 2002, still had as an assumption that Schering
9 would be entering into a -- some sort of licensing
10 agreement or co-marketing deal with Kos for Niaspan?

11 A. No, that was already rejected by that time.

12 Q. We can put that document aside.

13 In your binder, there's a document SPX 72, if
14 we could turn to that document.

15 A. 72, right.

16 Q. Once again, this is a document that complaint
17 counsel was questioning you about a few minutes ago.
18 Do you recall that, Dr. Horovitz?

19 A. Yes.

20 Q. And do you recall complaint counsel pointing
21 you to one of the pages on this document and asking you
22 whether that page indicated dosing with an evening meal
23 versus dosing at bedtime?

24 A. Yes.

25 Q. I direct your attention to -- again, this is

1 the page that we had talked about in your direct
2 testimony which was missing the stamp. It's -- it
3 would be after -- it would be the third page in the
4 document after SPX 1600114, so the number for this
5 page, which appears to be missing, would be 115.

6 A. It starts with, "Introduction"?

7 Q. It starts with "Introduction," yes.

8 A. Okay.

9 Q. Do you have that page?

10 A. Yes.

11 Q. And I direct your attention to the bottom of
12 that page and the sentence, in fact, carrying over onto
13 the next page, which says, "There may be some benefit
14 in once a day bedtime dosing since this correlates --"
15 do you see at the bottom of that page where it says,
16 "There may be some benefit in once a day bedtime
17 dosing"?

18 A. Correct.

19 Q. Is that consistent with this protocol
20 suggesting bedtime dosing?

21 A. Yes, I believe so.

22 Q. We can put that document away.

23 Dr. Horovitz, complaint counsel also showed you
24 a number of documents, communications between
25 Upsher-Smith and the FDA, about a pharmacokinetic

1 study. Do you recall that?

2 A. Right, I do.

3 Q. And those were documents communicating about
4 the requirement that Upsher-Smith perform a PK study in
5 order to -- as part of its filing for Upsher, and these
6 communications were in early 1997, correct?

7 A. Yes. There were documents describing the back
8 and forth on designing and developing a protocol.

9 Q. Have you seen any evidence in this case which
10 would suggest that Upsher-Smith, at the time of the
11 Upsher-Schering deal, had built into its December '97
12 estimate of when the NDA would be filed completion of
13 that PK study?

14 A. Yes, I believe they had in their earlier --
15 some earlier documents had -- before June had projected
16 starting that study about the summer and completing it
17 in time to file with the NDA. That did not happen, but
18 that was their projection.

19 Q. So, this was after the communications with the
20 FDA but before --

21 A. Correct, early summer.

22 Q. -- the license agreement in June that --

23 A. I believe that's correct.

24 Q. And at that point -- by that point,
25 Upsher-Smith had built into its timetables completion

1 of the PK study such that the filing would take place
2 in December of '97?

3 A. Yes, that -- that would have been very tight,
4 but it could have been done.

5 Q. And did you see evidence that Upsher-Smith had
6 built that into their timetables?

7 A. Yes.

8 Q. Now, complaint counsel showed you a document
9 that related again to the discussions between Schering
10 and Kos regarding the Niaspan product.

11 A. And the number?

12 Q. It was CX 540 dated February 11th, 1997.

13 A. Okay.

14 Q. And complaint counsel directed your attention
15 to the page 2804, which at the top says, "Preliminary
16 Labeling Indications for Niaspan."

17 A. Yes, I --

18 Q. Do you recall that?

19 A. I have it.

20 Q. And specifically referred you to the fourth and
21 fifth indications for Niaspan, the fourth one being,
22 "Reduction of recurrent myocardial infarction (MI) in
23 patients with a history of MI," and the fifth one was,
24 "Slowing progressive arthrosclerotic disease in
25 patients with a history of coronary artery disease when

1 used in combination with bile binding resins."

2 A. I remember that.

3 Q. Do you remember that?

4 And first of all, I'd like to ask you if you
5 can make out what this handwritten note says here. It
6 appears to say, "As a result of CARE and FATS study,
7 CLAS & HARP."

8 A. Yes, I think those are the acronyms for the
9 long-term studies which showed the reduction of
10 recurrent myocardial infarction with Niaspan and some
11 other ones.

12 Q. Now, were those studies that were done with
13 niacin generally or Niaspan specifically?

14 A. No, those were done with niacin.

15 Q. And I believe you stated your opinion that this
16 is consistent with the conclusion that any sustained
17 release niacin product would receive those indications
18 as a result of that.

19 A. Yes, the FDA, if they accept the premise that a
20 compound, in this case niacin, works in this
21 indication, they would provide what they call class
22 labeling for any niacin-related product.

23 Q. Okay. And what is class labeling, if you could
24 just state it more clearly?

25 A. Class labeling essentially says we're going

1 to -- FDA says we're going to give you the same label
2 for indications for any drug in a class. For instance,
3 the statins have class labeling. You will find
4 differences in the package insert because of side
5 effects or things like that, but primarily the
6 indications are class labeled.

7 Q. I'm going to show you now a document that you
8 don't have, complaint counsel did not provide it to
9 you. This is another document relating to the
10 communications between Schering-Plough and Kos
11 regarding Niaspan dated April 9, 1997, and I direct
12 your attention to the second page, which lists the same
13 indications that complaint counsel had showed you, and
14 I've highlighted indications number 4 and 5.

15 Do those appear to be the same number 4 and 5
16 on the document that they did show you?

17 A. I believe it's the same wording, yes.

18 Q. And the paragraph immediately following says,
19 "The last two indications were suggested by the FDA and
20 are based on the results of CARE, CLAS, HARP and FATS
21 studies which confirmed such beneficial effects on
22 niacin as a class."

23 A. Yes, I see that.

24 Q. Is that consistent with what you just testified
25 to as to that would apply to any sustained release

1 niacin?

2 A. Ah, yes.

3 Q. And any sustained release niacin would include
4 Niacor-SR?

5 A. That's correct.

6 Q. In that same line of questioning, complaint
7 counsel referred you to the draft labeling or the draft
8 package insert, which I believe you have a copy of, for
9 Niacor-SR.

10 A. Um-hum.

11 Q. Do you recall that?

12 A. Yes.

13 Q. And they directed -- complaint counsel directed
14 your attention to the section of this document of
15 indications and pointed out that the two indications
16 we've been talking about were not listed in that
17 section. Do you recall that?

18 A. In this document from Upsher-Smith, the June
19 24, yes.

20 Q. I'd like to direct your attention to the bottom
21 of the second page in that document, the final
22 paragraph, speaking with respect to --

23 A. Excuse me, are you talking about the first page
24 after the cover?

25 Q. Yes, it would be -- it's a little hard to read,

1 but it looks like it's 3780?

2 A. Yes, correct.

3 Q. And it's going to be -- it's going to begin
4 with, "The Coronary Drug Project," and it's the
5 sentence -- let me get this -- focus in on it. It
6 speaks of the Coronary Drug Project in 1975.

7 Do you happen to know if that was the study
8 that you referred to in your direct testimony or one of
9 the studies you referred to in your direct testimony
10 when you said that niacin as a class was shown to
11 reduce morbidity and mortality?

12 A. Yes, that is one of those large studies.

13 Q. Now, the last sentence and carrying over to the
14 next page talking about this says, "Over an observation
15 period of five years, nicotinic acid showed a
16 statistically significant benefit in decreasing
17 nonfatal, recurrent myocardial infarctions."

18 Do you see that sentence?

19 A. Yes, I do.

20 Q. And is that consistent with the class labeling
21 status for all SR niacin products on the basis of the
22 general studies relating to niacin?

23 A. It would be consistent for all niacin products,
24 including SR.

25 Q. And specifically, the -- one of the two that we

1 have talked about, one of the two indications, this is
2 in reference to the one of reducing nonfatal, recurrent
3 myocardial infarction?

4 A. Yes, I think that was the first one.

5 Q. Okay. Now, before I move on to the other
6 indication, I just want to clarify, this document is in
7 Upsher-Smith's Niacor-SR --

8 A. That's correct.

9 Q. -- in relation to Niacor-SR.

10 Now, on the bottom of that same page -- if you
11 will give me one second to look for where I saw this --
12 it refers to -- let me see if I can get it on the
13 screen here. "When compared to conventional measures,
14 intensive lipid-lowering combination therapy
15 significantly reduced the frequency of progression and
16 increased the frequency of regression of coronary
17 atherosclerotic lesions in patients with or at risk for
18 coronary artery disease."

19 Do you see that?

20 A. Yes.

21 Q. And do you see the reference to the FATS study?

22 A. FATS, F A T S.

23 Q. And I believe there's the CLAS study there
24 also?

25 A. Right.

1 Q. And where this says, "reduced the frequency of
2 progression and increased the frequency of regression
3 of coronary atherosclerotic lesions in patients at risk
4 for coronary artery disease," is that consistent with
5 the other indication that complaint counsel directed
6 your attention to?

7 A. The second one that talks about atherosclerotic
8 disease, yes.

9 Q. And again, this information is contained in the
10 1996 Upsher draft labeling, the first document that we
11 just --

12 A. It's contained in this document, yes.

13 Q. Which is -- relates not to Niaspan but to
14 Niacor-SR.

15 A. That's correct.

16 Q. And my final question on that point, just to
17 tie up this issue, again, we have the reference to the
18 CLAS and FATS studies in this document?

19 A. Yes.

20 Q. And going back to the original document, which
21 complaint counsel showed you, there was that -- the
22 matter of that handwritten note which specifically said
23 that this was "as a result of CARE & FATS study," do
24 you see that, and then it references the CLAS and HARP
25 studies?

1 A. Correct.

2 Q. And these would be the same studies referenced
3 in the Upsher document for Niacor-SR?

4 A. That's right.

5 Q. Dr. Horovitz, you were asked a question about
6 K-Dur during your cross examination. Do you recall
7 that?

8 A. I believe so, yes.

9 Q. Have you done any study in connection with this
10 case or otherwise of the potassium chloride market and
11 the market for K-Dur and potassium chloride products?

12 A. No.

13 Q. The final section I'd like to discuss with you
14 relates to two documents that complaint counsel showed
15 you relating to Upsher-Smith and the cross-license
16 between Upsher-Smith and Kos Pharmaceuticals in early
17 1997.

18 MR. EISENSTAT: I believe that's an in camera
19 document.

20 MR. RAOFIELD: Oh, excuse me, Your Honor, I
21 forgot that this was an in camera document that we need
22 to go in camera for.

23 JUDGE CHAPPELL: Okay, I am going to have to
24 ask the public to leave the courtroom. We are going to
25 consider some in camera or privileged information. You

1 will be notified when you're free to come back into the
2 courtroom. Thank you.

3 (The in camera testimony continued in Volume
4 16, Part 2, Pages 3882 through 3888, then resumed as
5 follows.)

6 CROSS EXAMINATION (cont)

7 BY MR. GIDLEY:

8 Q. Dr. Horovitz, I direct your attention to this
9 document that Mr. Eisenstat was working with you on,
10 CX 839. Do you still have that among the papers up
11 there at the podium, the witness stand?

12 A. I should. Yes.

13 Q. May I direct your attention, sir, to the second
14 page, and sir, you were asked a series of questions by
15 Mr. Eisenstat, were you not, about this document?

16 A. I was asked a few, yes.

17 Q. And in particular, Mr. Eisenstat directed your
18 attention, did he not, to the line referring to
19 Schering-Plough Limited? Is that correct?

20 A. Correct.

21 Q. And this document advises as of what date that
22 there was "not of interest" by Schering-Plough Limited?

23 A. The 31st of January, 1997.

24 Q. Why don't you set that aside.

25 I'd like to show you another document I've only

1 got one copy of, sir, so just look for it on your ELMO.
2 I'll start with identifying it.

3 I'll represent to you, sir, it's USX 162. I'll
4 try to make this as legible as possible. Sir, would
5 you read into the record the date at the upper
6 right-hand corner?

7 A. I believe it is 1 February 1997.

8 Q. Let me zoom in a little more for you.

9 A. Yes, that's clearer. Oh, 3, 3 February 1997.

10 Q. 3 February 1997. And on what letterhead does
11 this document appear?

12 A. Schering-Plough Limited.

13 Q. Is that the same entity that was on the prior
14 document?

15 A. I would assume so, yes.

16 Q. Can you refer back to the exhibit that Mr.
17 Eisenstat handed you, CX 839?

18 A. Yes.

19 Q. And directing your attention back to the
20 document we just had on the ELMO, I'll put it back up,
21 what was the Schering-Plough entity that he was asking
22 you questions about?

23 A. Schering-Plough Limited.

24 Q. All right. And that's the same as in USX 162,
25 is it not?

1 A. The one you have up there, yes, Schering-Plough
2 Limited.

3 Q. And this letter is signed by whom, sir?

4 A. Dr. Jackie Harris, business development
5 director.

6 Q. For what company?

7 A. I assume of Schering-Plough Limited.

8 Q. And sir, directing your attention to the first
9 paragraph, Niacor-SR, "Peter's response was for the UK.
10 I did actually pass on details to our International
11 Division, but, to date, have not had a response."

12 Do you see that language?

13 A. I do.

14 Q. Now, sir, does this post-date CX 839, the
15 document that Mr. Eisenstat showed you?

16 A. Yes, by about four days.

17 Q. And as of February 3rd, 1997, sir, what was the
18 status within Schering-Plough of Niacor-SR at this
19 time?

20 MR. EISENSTAT: Objection, Your Honor, beyond
21 the competence of the witness what the status was of
22 Niacor-SR.

23 MR. GIDLEY: Your Honor, the door is wide open.
24 This is a cross examination line that Mr. Eisenstat
25 opened. If this witness has no knowledge of these

1 marketing efforts, then it was not a proper subject for
2 cross examination in the first place.

3 MR. EISENSTAT: The current question didn't go
4 to the marketing efforts; the current question went to
5 the state of mind of Schering-Plough Limited and the
6 International Division. How can he know what their
7 state of mind is?

8 MR. GIDLEY: The cross examination, Your Honor,
9 if I may, went directly to what was Schering-Plough UK
10 doing with David Pettit's marketing efforts in late
11 January 1997. Now, four days later, we have a
12 subsequent document which Mr. Eisenstat did not show
13 the witness. I think we're entitled to hear the
14 witness' reaction to this document.

15 JUDGE CHAPPELL: So, you're asking him what the
16 status was based on his interpretation of this
17 document?

18 MR. GIDLEY: Yes, Your Honor. This expert,
19 like many other experts, has had to rely on business
20 records.

21 JUDGE CHAPPELL: I'll allow it. You can answer
22 it. I'll overrule the objection. I'll give it the
23 weight it deserves.

24 THE WITNESS: Well, my interpretation from what
25 I read is that Peter, whoever Peter is, has sent some

1 response for the UK company but that the International
2 Division -- and in most companies, the UK division
3 would report to the International Division -- has not
4 done their analysis or at least hasn't responded.

5 BY MR. GIDLEY:

6 Q. As of the date of USX 162. Is that your
7 interpretation?

8 A. As of the date 3 February '97, yes.

9 Q. Let me direct your attention to CX 338, the
10 Schering-Plough board of directors memo. Do you recall
11 this document, sir?

12 A. Yes, I believe I have it here.

13 Q. And it's for the record CX 338, is it not, sir?

14 JUDGE CHAPPELL: Let's give him time to
15 retrieve the document, Counselor.

16 THE WITNESS: Let me get it out. It's the last
17 one in the pile, CX 338.

18 BY MR. GIDLEY:

19 Q. Yes, sir.

20 A. I have it.

21 Q. Let me direct your attention -- sir, is this a
22 document that you've reviewed in connection with your
23 preparation for testimony in this case?

24 A. I did.

25 Q. Sir, directing your attention to the last page,

1 I've put that up on the ELMO.

2 A. Yes, I've got it, okay.

3 Q. Sir, in your professional opinion in reviewing
4 the facts that you have before you, do you have any
5 reason to believe that the economic value of \$225 to
6 \$265 million calculated on this page was an
7 intentionally false or fraudulent statement on behalf
8 of Schering-Plough as of the date that it was made?

9 A. No, because it matches pretty closely to my
10 analysis done separately without having seen this.

11 MR. GIDLEY: No further questions, Your Honor.

12 JUDGE CHAPPELL: Recross?

13 MR. EISENSTAT: Just very briefly, Your Honor.

14 JUDGE CHAPPELL: You may proceed as soon as Mr.
15 Gidley's clear.

16 RECROSS EXAMINATION

17 BY MR. EISENSTAT:

18 Q. Could you hold onto that document?

19 A. This one? Yes.

20 Q. That's CX 338?

21 A. Correct.

22 Q. Could you turn to the third page of the
23 document again, it bears the number SP 120268?

24 A. 68? Yes.

25 Q. Do you see that? That's the one you were just

1 asked about briefly.

2 A. I see it.

3 Q. And do you see the part of the sentence you
4 were asked about, "we informed them that any such
5 deal," et cetera? Do you see that line?

6 A. Yes.

7 Q. And do you see above there there's a line
8 that's been redacted, that is, Schering-Plough declined
9 to let anyone else see what that was? Do you know what
10 that line says?

11 A. I have no idea.

12 MR. EISENSTAT: I have no more questions, Your
13 Honor.

14 JUDGE CHAPPELL: Anything further?

15 MR. RAOFIELD: Nothing for Schering-Plough,
16 Your Honor.

17 MR. GIDLEY: No, Your Honor.

18 JUDGE CHAPPELL: Thank you, Dr. Horovitz,
19 you're excused.

20 Who's up next?

21 MR. CURRAN: Your Honor, Upsher-Smith has a
22 witness to call.

23 JUDGE CHAPPELL: What's your anticipated time
24 for this witness?

25 MR. CURRAN: I anticipate the direct exam to

1 last between half an hour and 40 minutes. He is an
2 out-of-town witness, Your Honor.

3 JUDGE CHAPPELL: You realize this is February
4 14th. We don't want to cause any relationship discord
5 by going late into the night.

6 MR. CURRAN: Your Honor, I think this witness
7 can go and we can all be comfortably at our homes by
8 the proper dinner hour.

9 JUDGE CHAPPELL: Mr. Eisenstat, are you
10 handling the cross?

11 MR. EISENSTAT: Mr. Kades will do the cross.

12 JUDGE CHAPPELL: Do you have a ballpark
13 estimate of the length of your cross?

14 MR. KADES: Well, Your Honor, after Mr. Nields
15 got it on the nose yesterday, I feel like the
16 pressure's on, but --

17 JUDGE CHAPPELL: The bar is very high now.

18 MR. KADES: I know. I can't imagine that my
19 cross would be more than 30 minutes, and it may be
20 shorter, but I've got a built-in window.

21 JUDGE CHAPPELL: I just wanted to get an idea
22 if we were in for another night where people had to
23 be let out the side door. It looks like we can manage
24 it.

25 Why don't we take 15 minutes. We will recess

1 until 4:35.

2 MR. CURRAN: Thank you very much, Your Honor.

3 (A brief recess was taken.)

4 JUDGE CHAPPELL: Mr. Curran, you have a witness
5 to call?

6 MR. CURRAN: Yes, Your Honor.

7 This next witness served as outside counsel to
8 Upsher-Smith during the litigation, the patent
9 infringement litigation with Schering and with the
10 ensuing settlement discussions, and he's appearing here
11 today to testify as to nonprivileged matters. He
12 appeared in the same manner at a deposition and was --
13 and gave full testimony there.

14 Accordingly, at this time, Upsher-Smith calls
15 Nicholas Cannella.

16 JUDGE CHAPPELL: Raise your right hand, please.
17 Whereupon--

18 NICHOLAS M. CANNELLA
19 a witness, called for examination, having been first
20 duly sworn, was examined and testified as follows:

21 JUDGE CHAPPELL: Thank you, have a set.

22 State your full name for the record, please.

23 THE WITNESS: Nicholas M. Cannella, C A N N E L
24 L A.

25 JUDGE CHAPPELL: Thank you.

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1 DIRECT EXAMINATION

2 BY MR. CURRAN:

3 Q. Mr. Cannella, are you employed?

4 A. I'm a partner at the Fitzpatrick, Cella, Harper
5 & Scinto law firm.

6 Q. Where is that law firm located?

7 A. We have offices in three cities, New York,
8 Washington, D.C. and in Orange County, California. I'm
9 in the New York office.

10 Q. Sir, does the law firm Fitzpatrick Cella have a
11 specialty?

12 A. Yes, we specialize in intellectual property
13 matters and related subject matter.

14 Q. And how big is the firm?

15 A. About 150 lawyers.

16 Q. Do you personally have a specialty?

17 A. Intellectual property litigation, patents and
18 trademarks.

19 Q. Do you focus in any other areas, any experience
20 in other areas?

21 A. Well, I've been at Fitzpatrick Cella for the
22 last 16 years. Prior to that I was at Simpson Thatcher
23 trying general commercial cases, including antitrust
24 cases, and I work in the antitrust field as it relates
25 to intellectual property matters in my current

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1 position.

2 Q. Very good.

3 Does your practice focus on any particular
4 industries?

5 A. I litigate in any industry that clients ask me
6 to litigate in, but I have litigated in the
7 pharmaceutical industry extensively and also in the
8 electronics industry.

9 Q. Okay. Sir, did there come a time at which you
10 were contacted by Upsher-Smith or a representative of
11 Upsher-Smith to represent them in connection with
12 patent infringement litigation?

13 A. Yes.

14 Q. Okay. Can you please explain the circumstance
15 of that contact?

16 A. Yes. I believe the contact was December of '95
17 or January of '96, I received a telephone call from
18 Mark Robbins at Upsher-Smith asking if my firm and I
19 were available to represent it in connection with a
20 patent infringement action that had been brought
21 against it by Key Pharmaceuticals or Schering-Plough
22 relating to an ANDA application that Upsher-Smith had
23 filed.

24 Q. Did Mr. Robbins say why he was contacting you
25 and your firm?

1 A. Yes. As I understood it, Upsher-Smith's
2 regular patent counsel was the Merchant & Gould firm in
3 Minnesota, but a conflict had arisen, and Merchant &
4 Gould was not available to Upsher-Smith. Mr. Robbins
5 had gotten my name through a number of sources as a
6 recommendation, someone who may be able to help him
7 out.

8 Q. Sir, do you know the nature of the conflict
9 that Merchant & Gould had?

10 A. I do. As I recall it, a then Merchant & Gould
11 partner had in a prior employment as an associate at
12 another firm been involved in some capacity in the
13 prosecution of the Schering-Plough patent that was the
14 subject of the litigation, and Schering-Plough asserted
15 that as a conflict so that Merchant & Gould felt it was
16 not able to proceed in the litigation.

17 Q. So, Merchant & Gould was forced out of the
18 representation. Is that correct?

19 A. That is correct.

20 Q. Sir, were you and your firm ultimately retained
21 by Upsher-Smith?

22 A. Yes.

23 Q. Sir, you've described the lawsuit a little bit.
24 Do you recall where it was?

25 A. It was in the District Court in Newark, New

1 Jersey, before Judge Walls.

2 Q. And sir, after being retained, did you have
3 primary responsibility for the defense of that case?

4 A. I did not. I explained to Mr. Robbins when he
5 visited us that I was at that time fairly heavily
6 engaged in other litigations. I had with me one of my
7 partners, Bruce Haas, and Upsher-Smith agreed to retain
8 us and have Bruce have the day-to-day responsibility in
9 the case, and I would serve in a senior adviser
10 capacity to the extent my time allowed.

11 Q. And did you, in fact, serve in that capacity
12 going forward?

13 A. I did.

14 Q. Were you kept informed of the status of the
15 litigation?

16 A. I wouldn't say that I was kept informed on a
17 day-by-day, every development in the case capacity, but
18 I was visited by Bruce from time to time and given
19 background on issues that he was facing so that he
20 could ask my opinion as to how to proceed.

21 Q. Now, sir, that litigation ensued for how long?

22 A. Well, as I say, I believe the lawsuit itself
23 started in either December of '95 or January of '96,
24 and it was ultimately settled in June or July of '97.

25 Q. So, roughly 18 months?

1 A. That's correct.

2 Q. Sir, I know you didn't have day-to-day
3 responsibilities, and I don't want a tremendously
4 detailed answer on this, but can you describe in
5 general terms the course of the litigation during those
6 18 months?

7 A. I would describe it as a vigorously contested
8 litigation by both parties. In fact, it started with a
9 motion right out of the box not only relating to the
10 Merchant & Gould disqualification but potentially
11 involving the disqualification of Upsher-Smith's FDA
12 counsel, the Hyman Phelps firm, and a motion to
13 preclude my firm from getting any work product from the
14 Merchant & Gould firm because of some fruit of the
15 poisonous tree type argument.

16 Q. All right, sir, separate and apart from
17 disqualification issues and so forth, how did the
18 litigation proceed?

19 A. As I said, it was vigorously contested. There
20 were -- there was a great deal of discovery. There
21 were many discovery battles, as I recall it, and both
22 parties contested the litigation with vigor, leading up
23 to our filing of a summary judgment motion on
24 noninfringement grounds and then a subsequent summary
25 judgment motion on inequitable conduct grounds in the

1 procurement of the patent.

2 Q. Sir, do you recall when you filed at least the
3 first summary judgment motion?

4 A. I believe the noninfringement summary judgment
5 motion was the first of the two that was filed, and my
6 best recollection is that it was filed at the end of
7 1996.

8 Q. Was that argued?

9 A. Eventually it was. One of the frustrations in
10 the case was that Judge Walls did not hear argument on
11 the summary judgment motion, I think he scheduled it on
12 one or even more than one occasion and then put the
13 argument off. It was eventually argued on the day
14 before the trial itself was to commence.

15 Q. Sir, was the summary judgment motion -- were
16 either of the summary judgment motions ever granted?

17 A. No.

18 Q. Sir, have you ever heard of a gentleman by the
19 name of Dr. or Dean Gilbert Banker?

20 A. I've never met Dr. Banker, but I know the name.
21 He was an expert that was involved in the underlying
22 patent case.

23 Q. For whom?

24 A. Interestingly, for both sides. What happened
25 is we contacted Dr. Banker and asked him if he would be

1 interested in serving as an expert for Upsher-Smith and
2 sent him some materials. We proceeded in the belief
3 that he was, indeed, interested and would serve as an
4 expert for Upsher-Smith.

5 Subsequently, at the 11th hour before a
6 scheduled meeting with my partner Mr. Haas and some
7 Upsher-Smith personnel, he called and said he was not
8 interested in serving as an expert for Upsher-Smith,
9 and I believe he even went so far as to then turn up as
10 an expert for Schering-Plough in the case.

11 Q. Sir, did your firm represent Upsher-Smith for
12 free?

13 A. No.

14 Q. In fact, you sent monthly bills, correct?

15 A. That's our policy, and I assume that the bills
16 were sent in accordance with the policy once a month.

17 Q. Nothing to be ashamed of, sir.

18 A. I am not at all.

19 Q. Mr. Cannella, I'd like to direct your attention
20 to the binder I've placed in front of the witness
21 chair.

22 Your Honor, I've provided one to the Court and
23 one to complaint counsel and counsel for Schering as
24 well.

25 Now, Mr. Cannella, I do not want to belabor

1 this, but I want to draw your attention to the first 19
2 tabs, and these are all documents that have already
3 been admitted into evidence, so I'm not going to ask
4 you foundational questions and so forth, but I'd like
5 you to identify and confirm that these are, in fact,
6 bills sent by your firm to Upsher-Smith.

7 Let's begin under tab 1, sir.

8 A. Yes.

9 Q. Do you see USX 83 there?

10 A. I don't, but --

11 Q. If you look at the bottom --

12 A. Oh, I'm sorry, now I do, yes.

13 Q. That's just a reference for this case.

14 A. That's fine.

15 Q. And then by the way, the production number to
16 the right of that indicates FitzCella in this case
17 0075. That just indicates the source of the
18 production.

19 A. Okay.

20 Q. Sir, the document under tab 1, USX 83, does
21 that appear to be a redacted bill from Fitzpatrick
22 Cella to Upsher-Smith?

23 A. Yes, for the time period -- services would have
24 been rendered during the time period January 1, 1996 to
25 January 31, 1996.

1 Q. And the total on this bill is approximately
2 \$31,000?

3 A. Services and disbursements, correct.

4 Q. Very good.

5 Then under tab 2, sir, a similar bill, this
6 time covering the period February 1996?

7 A. Yes.

8 Q. And the total of \$31,000 and change?

9 A. That's correct.

10 Q. Sir, by the way, all of these bills relate to
11 the patent infringement litigation, correct?

12 A. That is correct.

13 Q. Okay. Sir, tab 3, do you see USX 85 there?

14 A. Yes.

15 Q. And this is the bill for the period of March
16 1996?

17 A. Yes, that's correct.

18 Q. And the total on that bill is \$51,000 and
19 change?

20 A. Yes.

21 Q. Sir, under tab 4, is that another bill, this
22 time for April of 1996?

23 A. Yes.

24 Q. And is USX -- oh, this is actually a
25 continuation of USX 85, I'll note for the record.

1 The total on that invoice, sir, is \$91,000 and
2 change?

3 A. That's correct.

4 Q. Under tab 5, do you see USX 86 there?

5 A. Yes.

6 Q. And that's the bill for May of '96?

7 A. That's correct.

8 Q. And the total is approximately \$100,000?

9 A. That's correct.

10 Q. Under tab 6, that's the bill for June of '96?

11 A. Yes.

12 Q. And the total on this is approximately
13 \$102,000?

14 A. That's correct.

15 Q. And I don't know if I said that, that's USX 87.

16 A. Yes.

17 Q. Under tab 7, sir, that's USX 88.

18 A. Yes.

19 Q. And that's the bill for July of '96.

20 A. Correct.

21 Q. And the total there is \$92,000 and change?

22 A. Yes.

23 Q. Under tab 8, sir, that's USX 89.

24 A. Correct.

25 Q. That's the bill for August of '96?

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- 1 A. Yes.
- 2 Q. And the total is approximately \$163,000?
- 3 A. That's correct.
- 4 Q. Sir, on tab 9, that's September of '96,
- 5 correct?
- 6 A. Yes, sir.
- 7 Q. That's USX 90?
- 8 A. Yes.
- 9 Q. And the total is approximately \$128,000?
- 10 A. Yes.
- 11 Q. Under tab 10, that's USX 91, correct?
- 12 A. Yes, it is.
- 13 Q. And that's the bill for October of '96?
- 14 A. Yes, it is.
- 15 Q. And the total is approximately \$165,000?
- 16 A. That's correct.
- 17 Q. Tab 11, sir, that's USX 93, correct?
- 18 A. Yes, it is.
- 19 Q. And this is the bill for November of '96?
- 20 A. Correct.
- 21 Q. And the total is approximately \$120,000?
- 22 A. Yes.
- 23 Q. Under tab 12, that's USX 92, correct?
- 24 A. Yes, it is.
- 25 Q. And the -- that's for the period of December

1 '96?

2 A. Yes.

3 Q. And the total there is approximately \$135,000?

4 A. That's correct.

5 Q. Under tab 13, we're into the period January of

6 '97.

7 A. Yes.

8 Q. That's USX 94.

9 A. Yes.

10 Q. And the total there is approximately \$220,000?

11 A. That's correct.

12 Q. Under tab 14, sir, that's USX 95, correct?

13 A. Yes, it is.

14 Q. Covering the period February 1997?

15 A. That's correct.

16 Q. And the total there is approximately \$185,000?

17 A. Yes.

18 Q. Under tab 15, USX 96?

19 A. Correct.

20 Q. That's for March of '97?

21 A. Yes.

22 Q. And the total there is \$217,000, approximately?

23 A. That's correct.

24 Q. Under tab 16, that's the bill for April of '97?

25 A. Yes, it is.

1 Q. That's USX 97?

2 A. Yes.

3 Q. And the total there is approximately \$182,000?

4 A. That's correct.

5 Q. Under tab 17, it's USX 99, correct?

6 A. Yes, it is.

7 Q. And that's the bill for May of '97?

8 A. Yes.

9 Q. And the total there is approximately \$340,000,
10 correct?

11 A. Yes, it is.

12 Q. And under tab 18, that's the bill for June of
13 '97?

14 A. That's correct.

15 Q. And that's USX 100, correct?

16 A. Yes.

17 Q. And the total there is approximately \$408,000,
18 correct?

19 A. Yes.

20 Q. And then under tab 19, that's USX 101, correct?

21 A. Yes, it is.

22 Q. And now this is for July of '97, correct?

23 A. Yes, it is.

24 Q. And the total there is \$28,000 and change,
25 correct?

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1 A. Yes, that's right.

2 Q. Okay.

3 Thank you for your indulgence in that, Your
4 Honor.

5 JUDGE CHAPPELL: You're welcome, Mr. Curran.

6 BY MR. CURRAN:

7 Q. Mr. Cannella, did there come a time when you
8 participated in discussions to settle the litigation?

9 A. I participated in discussions about a business
10 deal between Schering-Plough and Upsher-Smith.

11 Q. Okay. When did you participate in such
12 discussions?

13 A. Early June of 1997.

14 Q. And how did your participation begin?

15 A. My partner, Bruce Haas, asked me if I could
16 attend a meeting because he had a conflict on his
17 schedule. I agreed, and I went to the meeting.

18 Q. Sir, did you have any discussions with anybody
19 else prior to the actual meeting?

20 A. Yes.

21 Q. Okay. With whom did you have discussions?

22 A. After Mr. Haas informed me of the meeting, I
23 received a telephone call from a lawyer at
24 Schering-Plough named John Hoffman.

25 Q. Had you ever heard of him before?

1 A. I had not.

2 Q. What did he say?

3 A. He introduced himself and gave me a little
4 background on who he was and his career. As I recall,
5 he had spent a number of years at one of the bigger
6 firms in New York before going to Schering-Plough, told
7 me that he'd like to discuss the logistics and ground
8 rules for the meeting which he understood I would be
9 attending together with the Upsher-Smith
10 representatives.

11 Q. Let me back up a little bit.

12 Do you remember any more details about his
13 introduction of himself?

14 A. Yes, he told me -- I can't be precise as to the
15 name of the firm. My recollection is that he said he
16 had been at the Cadwalader firm and that he had done
17 antitrust work at the Cadwalader firm. He offered that
18 information because he wanted me to be aware that there
19 were sensitive issues with respect to antitrust in any
20 business deal. I told him that I had been involved in
21 these types of transactions and was aware of the
22 sensibilities.

23 Q. Sir, you mentioned that --

24 A. Sensitivities I should say.

25 Q. -- you mentioned that he discussed logistics

1 and ground rules.

2 A. That's correct.

3 Q. Taking those seriatim, what logistics did he
4 discuss?

5 A. Well, I think logistics, we just confirmed the
6 time and place of the meeting and who would be
7 attending the meeting from each side. And with respect
8 to ground rules, he told me that this was in
9 Schering-Plough's mind a meeting to discuss business
10 opportunities, that there would be no need for any
11 debate as to the merits of the underlying patent case,
12 and again, mentioned the sensitivities of antitrust
13 considerations.

14 Q. Did he indicate what business opportunities
15 were going to be discussed?

16 A. He did not in that telephone call to the best
17 of my knowledge.

18 Q. Did he indicate why there would not be a debate
19 on patent issues?

20 A. He did not explicitly tell me why there would
21 not be a debate on patent issues. He did tell me that
22 there would be no one there from Covington, which was
23 handling the patent case for Schering-Plough, and I had
24 the impression from the discussion that the parties had
25 already talked about those issues, and they were not on

1 the table for discussion at the business meeting.

2 Q. Sir, is there anything else that you recall
3 from this initial phone conversation with Mr. Hoffman?

4 A. No, I don't believe so.

5 Q. Sir, are you sure this call took place?

6 A. Absolutely.

7 Q. Are you sure that Mr. Hoffman raised antitrust
8 issues in this call?

9 A. Absolutely.

10 Q. Sir, what happened next?

11 A. The meeting was set for Schering-Plough's
12 facility in New Jersey. I'm not precise as to the
13 town, I think it's Kenilworth. And I had spoken with
14 Mr. Troup just to get logistics squared away with him.
15 I drove to the meeting, and as prearranged, I met Mr.
16 Troup and the gentleman who accompanied him, a fellow
17 whose name was Andrew, and I believe his last name was
18 Hirschberg, although I'm not 100 percent certain. They
19 also drove to the meeting in Andrew's car. We met in
20 the parking lot, had a brief discussion, proceeded into
21 the meeting.

22 Q. Had you ever met either of them before?

23 A. I had not. I had spoken with Mr. Troup on the
24 phone I believe during the course of the litigation,
25 but I had never met him in person.

1 Q. How did you get to the meeting in Kenilworth?

2 A. I drove my car.

3 Q. And then did you proceed in from the parking
4 lot into the meeting?

5 A. I did, after admiring Mr. Hirschberg's car.

6 Q. What kind of car did he have?

7 A. It was a Mercedes convertible, and I was
8 driving a Miata.

9 Q. Sir, who was at the meeting for
10 Schering-Plough?

11 JUDGE CHAPPELL: Excuse me, sir, the court
12 reporter didn't understand. You were driving a what?

13 THE WITNESS: A Miata.

14 BY MR. CURRAN:

15 Q. And Hirschberg had the Mercedes?

16 A. Unfortunately, yes.

17 Q. Who was at the meeting for Schering-Plough?

18 A. John Hoffman was there. The senior business
19 person was a gentleman whose name I believe was Ray
20 Kapur, and there were I believe one or two other
21 younger business people who I viewed as sort of being
22 there in support of Mr. Kapur.

23 Q. Have you ever met any of them before?

24 A. I had not, except my telephone conversation
25 with Mr. Hoffman.

1 Q. Sir, what happened at the meeting?

2 A. Well, after the usual exchange of pleasantries
3 and the offer of coffee, it was a business meeting.
4 Mr. Troup and Mr. Hirschberg made a presentation to
5 Schering-Plough as to four or five Upsher-Smith
6 products which Upsher-Smith had at various stages of
7 development, so somewhere in their development
8 pipeline, and explained the status, provided written
9 materials to Schering-Plough with respect to those
10 products, and explained to Schering-Plough why
11 Upsher-Smith felt those products had significant value
12 to Schering-Plough.

13 Q. Do you remember anything they said specifically
14 about the value of the products?

15 A. Well, I do recall that Upsher-Smith, and I
16 believe it was Mr. Troup who said it, said that he
17 thought if Schering-Plough took these products over,
18 Schering-Plough should be willing to pay somewhere in
19 the neighborhood of \$80 million or slightly above that,
20 and I remember that there was a discussion of that
21 value and how Upsher-Smith had arrived at it.

22 Q. Do you remember any more details as to how
23 Upsher-Smith justified the \$80 million proposal?

24 A. Well, as I said at my deposition, I can't
25 recall precisely the products that were being

1 discussed, but I do recall that one of the products
2 being discussed apparently was very similar in nature
3 to a product that another pharmaceutical company, a
4 company called Kos Pharmaceutical, had in the market,
5 and I recall that there was a discussion of the fact
6 that Kos had fairly recently, so contemporaneous to the
7 meeting, gone through some form of transaction, I
8 believe it was described as an initial public offering,
9 based on that product as its primary asset and that Kos
10 had a value of something like \$500 million.

11 Q. Sir, do you remember anything else about what
12 the Upsher-Smith representatives said during the
13 meeting?

14 A. No, again, all I recall is that they made the
15 points to Schering-Plough that these products were in
16 the pipeline, these products had value and that -- and
17 they -- and in particular I believe they said they
18 would have more value to Schering-Plough because of
19 Schering's resources in bringing them to market and
20 marketing them.

21 Q. Sir, what was the nature of the written
22 materials you referred to?

23 A. My best recollection is that it was a booklet
24 of some kind, it might have even been a three-ring
25 booklet, and it had within it sections on each of the

1 products that were being discussed.

2 Q. Sir, what did -- well, did you say anything
3 during the meeting?

4 A. No, I did not.

5 Q. Did the Schering-Plough people say anything
6 during the meeting?

7 A. Yes.

8 Q. What did they say and who said it?

9 A. Well, my only recollection of anyone speaking
10 on behalf of Schering-Plough was that Mr. Kapur did the
11 speaking on behalf of Schering-Plough, and I would
12 characterize it as a dialogue between Mr. Kapur, as
13 assisted by these other two younger fellows, and the
14 Upsher-Smith representatives inquiring as to the
15 products, their status, et cetera. So, in the nature
16 of a due diligence negotiation kind of discussion.

17 Q. Do you remember any specific questions that Mr.
18 Kapur asked?

19 A. I cannot recall any of the specific questions.
20 I do recall there was a fair amount of dialogue on Kos
21 Pharmaceutical and this \$500 million for one of these
22 products.

23 Q. Sir, how long did the meeting last?

24 A. My best recollection, an hour and a half, two
25 hours, somewhere in that neighborhood.

1 Q. What did you do after the meeting?

2 A. Well, the meeting ended with Mr. Kapur on
3 behalf of Schering-Plough saying that they were
4 going -- they, Schering-Plough, were going to continue
5 to analyze the issues and their interest in the
6 products and get back to Upsher-Smith.

7 Q. That's how it was left at the end of the
8 meeting?

9 A. That's how the meeting ended.

10 Q. So, you left.

11 A. Yeah, we had a -- Mr. Troup, Mr. Hirschberg and
12 I had a brief farewell conversation in the parking lot,
13 and I left.

14 Q. Okay. What was the next step in the settlement
15 discussions or the licensing business opportunities
16 discussions?

17 A. My best recollection is that within a day or
18 two, I had another conversation with Mr. Troup and Mr.
19 Hirschberg just sort of reviewing what had happened at
20 the meeting.

21 Q. All right, let me back up for a second based
22 upon my misspeaking a moment ago, and let me ask, in
23 that meeting in New Jersey at Schering-Plough, was
24 there any discussion of the patent litigation that was
25 pending between these two parties?

1 A. No.

2 Q. The only subject discussed was this business
3 opportunity, this possible licensing transaction?

4 A. A transaction whereby Schering-Plough would
5 acquire rights in certain Upsher-Smith developmental
6 products. It wasn't clear that it would be a licensing
7 transaction or the purchase of patent rights or what.
8 It was just are you interested, at what dollar value,
9 and as I said, Mr. Kapur was clearly aware of these
10 products and knowledgeable about them, asked questions
11 concerning their status, and then it ended with Mr.
12 Kapur saying let us think about it some more and we'll
13 get back to you.

14 Q. Okay. And what was the next step in terms of
15 your personal involvement?

16 A. As I said, I got a phone call from Mr. Troup
17 and Mr. Hirschberg within a day or so, and we just sort
18 of reviewed what had happened at the meeting.

19 Q. What was the next involvement you had in
20 dealing with somebody at Schering-Plough?

21 A. Either in that phone call that I just mentioned
22 or a subsequent phone call, I was asked by Mr. Troup if
23 I was available to participate in a telephone
24 conference with Upsher-Smith representatives and
25 Schering-Plough representatives.

1 Q. Did you?

2 A. I did.

3 Q. And when did that occur?

4 A. I would place it within a week of the
5 face-to-face meeting that I've just described.

6 Q. And what's your recollection of when that
7 face-to-face meeting occurred?

8 A. As I said, I think it was early June, somewhere
9 in the June 10-11-12 area, something like that.

10 Q. Okay. So, this is a few days after that?

11 A. That's correct.

12 Q. Where were you for this telephone conference?

13 A. In my office in New York.

14 Q. Who else was on the line?

15 A. Well, I know that Mr. Troup and Mr. Hirschberg
16 were on the line from Upsher-Smith's facilities in
17 Minnesota. I also know that there were Schering-Plough
18 representatives on the line. I believe, again, the
19 lead spokesperson for Schering was again Mr. Kapur.

20 Q. How do you know that Mr. Troup and Mr.
21 Hirschberg were in Minnesota?

22 A. I think in the phone call when they asked me to
23 participate, they told me that they were both together,
24 and I also had a conversation offline with Mr.
25 Hirschberg while the conference call was going on.

1 Q. What do you mean by that, "a conversation
2 offline"?

3 A. Well, during the course of the conversation
4 that was taking place in the conference call, Schering
5 had obviously done some additional due diligence and
6 obviously had expressed sincere interest and was
7 offering I believe something like \$60 million to
8 Upsher-Smith to acquire rights to these four products.
9 Upsher-Smith was, as I said earlier, looking for
10 something like \$80 million, and as the parties were
11 exploring ways to bridge that gap, the thought -- a
12 thought occurred to me as one of the ways to possibly
13 bridge the gap, but since I had not had the opportunity
14 to make this suggestion to Mr. Troup, I didn't want to
15 offer it in the conference call if it was something
16 that he was not interested in.

17 Q. Okay, I don't want to get into your private
18 discussion with Mr. Troup, but by offline, you had a
19 separate telephone call --

20 A. Yeah, I have two lines in my office. I put the
21 conference call on mute and called Mr. Troup's office
22 on my other line, asked Mr. Hirschberg to step out and
23 relayed my idea to him so that he could share it with
24 Mr. Troup.

25 Q. Okay. Where were the Schering-Plough people to

1 the best of your knowledge?

2 A. I truly do not know. They may have -- they may
3 have been in Minnesota for all I know.

4 Q. What else do you remember about this meeting or
5 conference that you participated in by telephone?

6 A. Well, as I say, I remember the parties
7 discussing where they were and that there was a gap, a
8 financial gap in terms of doing this business deal I
9 believe of between \$60 and \$80 million -- I'm sorry,
10 between Schering-Plough's offer of 60 and
11 Upsher-Smith's request for \$80 million, and I recall
12 that at one point in the conversation, one of the ways
13 to potentially bridge the gap that was suggested was to
14 include milestone payments in the agreement so that as
15 the products reached certain stages in the countries
16 that were being talked about, additional payments would
17 be made.

18 Q. That's what you mean by milestone payments?

19 A. That's what I meant by milestone payments, yes.

20 Q. You said a moment ago that you thought that the
21 Schering-Plough people or Mr. Kapur had done some
22 additional due diligence, right?

23 A. Yes, I did.

24 Q. What's your basis for saying that?

25 A. They certainly were knowledgeable -- I'm

1 neither an expert in the pharmaceutical industry, nor
2 am I an expert in valuing products, but Mr. Kapur and
3 his -- well, he was the only spokesperson, but Mr.
4 Kapur certainly was asking pointed questions and
5 talking about specific values in specific countries, as
6 I recall it.

7 Q. How did that meeting or conference conclude?

8 A. No agreement was reached during the course of
9 the telephone conference, but again, I believe it was
10 left that the parties would continue to talk with each
11 other about the possibilities of doing this deal.

12 Q. At this meeting or conference, was there any
13 discussion of the patent case that was going on between
14 the two companies?

15 A. No.

16 Q. What was your understanding as to why that
17 wasn't a subject of discussion at this telephone
18 conference or at the earlier meeting in Kenilworth?

19 A. Again, consistent with the impression I had
20 from prior to the Kenilworth meeting, I believe the
21 parties had resolved those issues in principle at
22 least, so they were off the table and they were only
23 talking about business.

24 MR. KADES: Objection, Your Honor, I believe
25 the witness has just testified to what his impression

1 was. I think that based on Your Honor's order, it goes
2 beyond the scope of what he can testify to. He can
3 testify to what was said to him and what he said, but
4 to the degree he starts talking about his impressions,
5 and if those impressions are based upon any discussions
6 with the client, they're based upon an area for which
7 we have not been allowed to conduct discovery.

8 JUDGE CHAPPELL: I am going to sustain it. We
9 don't need to hear what his impression is. He's a fact
10 witness, isn't he?

11 MR. CURRAN: Yes, Your Honor.

12 JUDGE CHAPPELL: Sustained.

13 BY MR. CURRAN:

14 Q. But sir, there was no discussion of the patent
15 litigation during either the Kenilworth meeting or the
16 subsequent meeting or telephone conference that you
17 just described?

18 A. That's correct.

19 Q. Sir, at either of those meetings, was there any
20 reference to an entry date upon which Upsher-Smith
21 could enter the market in resolving the patent
22 litigation?

23 A. No.

24 Q. Was there any reference at either of those two
25 meetings to 180-day exclusivity?

1 A. No.

2 Q. Are you familiar with that term?

3 A. I am.

4 Q. Sir, at either of those two meetings or
5 conferences, was there any statement by anyone that
6 Upsher-Smith should be paid for delayed entry?

7 A. No.

8 Q. Sir, what happened next after this telephone
9 conference? I call it a telephone conference, from
10 your perspective anyway.

11 A. It was -- yes, from my perspective, it was a
12 telephone conference.

13 Q. Okay. What happened after this telephone
14 conference?

15 A. Within a day or two after the conference, I
16 received a telephone call from Mr. Troup. I remember
17 it specifically because it was about midmorning, and
18 I'm on my firm's management committee, and we were in a
19 management committee meeting, but I was -- my secretary
20 brought in a note, told me it was Mr. Troup and that he
21 would like me to step out if I could. And I did, and I
22 took the call.

23 Q. Okay. What did you do after speaking to Mr.
24 Troup?

25 A. I endeavored to memorialize the terms of the

1 agreements that Upsher-Smith and Schering-Plough had
2 reached.

3 Q. Did you do that?

4 A. I did. I drafted something that I labeled
5 Points of Agreement.

6 Q. Mr. Cannella, I'd like to ask you to look in
7 that binder again, and I'd like to ask you to look at
8 the document under tab 20. Now, disregarding for the
9 moment the first page, the fax transmittal, what are
10 the other pages under that tab?

11 A. They are -- the first three pages beyond the
12 fax transmittal page are the Points of Agreement, and
13 the next page -- I'm sorry, the next two pages are
14 Attachment A referred to in the Points of Agreement.
15 This is what I drafted.

16 MR. CURRAN: Your Honor, at this time I move
17 for the admission of USX 233 into evidence.

18 MR. KADES: I have no objection, Your Honor.

19 MR. NIELDS: No objection, Your Honor.

20 JUDGE CHAPPELL: USX 233 is admitted.

21 MR. CURRAN: Thank you, Your Honor.

22 (USX Exhibit Number 233 was admitted into
23 evidence.)

24 BY MR. CURRAN:

25 Q. Mr. Cannella, just for the record, there are

1 certain redactions noted on the second page of this
2 exhibit.

3 A. I see that.

4 Q. All right. Those redactions were not there
5 when you prepared the document, correct?

6 A. That is correct.

7 Q. And just for the record, this copy of the
8 document came out of Schering-Plough's production, but
9 they must have had some attorney comment on here, but
10 it appears in doing the redaction certain language was
11 omitted in paragraph 3.

12 A. Yes, I see that.

13 Q. Do you see that, sir?

14 A. I do.

15 Q. Do you recall what that said?

16 A. Well, I can't give you it back verbatim, but I
17 believe it said, "in the event in the future any
18 governmental agency or court of last resort."

19 Q. Sir, what happened next after you prepared the
20 Points of Agreement?

21 A. I sent my draft out to Upsher-Smith to make
22 sure that it accurately reflected the various
23 agreements that the parties had come to. That was
24 confirmed to me, and then the document was transmitted
25 to Schering-Plough.

1 Q. What happened next after this Points of
2 Agreement and the attachment were provided to
3 Schering-Plough?

4 A. Well, my best recollection is that having
5 learned that the document was in Schering-Plough's
6 hands but having not heard anything from
7 Schering-Plough, that I called John Hoffman and asked
8 as to the status.

9 Q. What did he say?

10 A. He told me that they had the Points of
11 Agreement, that they were working on a more detailed
12 document. I inquired when we were likely to see it.
13 He told me he wasn't entirely sure. And then we waited
14 for it.

15 Q. Did you -- you didn't wait forever. What
16 happened next?

17 A. Well, I was a little concerned with the passage
18 of time since I wanted to at least be able to call home
19 and tell my wife when I might be coming home, but
20 eventually we did receive a new document from
21 Schering-Plough which was Schering-Plough's version of
22 what the agreement should look like.

23 Q. Sir, I'd like to direct your attention to the
24 document under tab 21. Do you see a multipage document
25 there labeled USX 105?

1 A. I do.

2 Q. Sir, is that the revised draft, if you will,
3 that you just referred to?

4 A. I wouldn't call it a revised draft, because
5 they did not -- Schering didn't work off the Points of
6 Agreement and revise the Points of Agreement. They
7 provided a new document, but that is the new document
8 that I referred to earlier.

9 Q. What happened -- what did you do after
10 receiving this new document?

11 A. Well, I see from the fax cover sheet that it
12 was apparently sent both to me and to Ian Troup
13 simultaneously. I unquestionably had conversations
14 with Mr. Troup about the new document. And I then
15 subsequently had a series, although I cannot quantify
16 the number, but a series of telephone conversations
17 with Mr. Hoffman concerning the Schering-Plough version
18 of the document and why it was not acceptable to
19 Upsher-Smith.

20 Q. Sir, ultimately, did you -- well, ultimately,
21 did Upsher-Smith and Schering reach agreement on the
22 terms?

23 A. They did, but Mr. Hoffman and I were unable to
24 reach that agreement, so at some point in these
25 discussions, the suggestion was made -- and I believe I

1 made it -- that it made sense to get the principals
2 back onto the telephone to seek their guidance as to
3 how to resolve some of the differences the lawyers were
4 having with the form of the agreement.

5 Q. Sir, do you remember what issues the lawyers
6 couldn't resolve?

7 A. In general terms, yes.

8 Q. What were they?

9 A. The Points of Agreement which I had sent over
10 acknowledged that Schering-Plough owned the patent that
11 was at issue in the lawsuit but did not acknowledge any
12 liability or wrongdoing on behalf of Upsher-Smith. The
13 Schering-Plough version reflected in tab 21 had
14 provisions -- and I'm doing this without looking at the
15 document -- but had provisions that dealt with
16 admissions by Upsher-Smith that the Schering-Plough
17 patent was valid and enforceable and admissions that
18 the planned Upsher-Smith product infringed that patent,
19 and those were not acceptable.

20 There were additional provisions that were not
21 acceptable having to do with the scope of the license
22 grant with respect to the Schering-Plough to
23 Upsher-Smith license.

24 Q. Sir, I'd like to direct your attention to the
25 document under tab 22.

1 A. Yes.

2 Q. Okay, this document is already in evidence, but
3 I'd like to ask you to identify it, if you can.

4 A. This is the agreement that the parties
5 initialed and signed on the night of June 17th or
6 perhaps after midnight, so it might have actually been
7 June 18th.

8 Q. Sir, I'd like to direct your attention to the
9 fifth page under that tab, which bears the number at
10 the bottom (i).

11 A. Yes.

12 Q. And specifically, I'd like to direct your
13 attention to paragraphs 1 and 2 there.

14 A. Yes.

15 Q. Do those paragraphs represent the ultimate
16 outcome of this dispute you referred to a moment ago?

17 A. Yes.

18 Q. I'd like to ask you to compare those paragraphs
19 in USX 104, which is under tab 22, to the counterpart
20 sections in USX 105, which is the document under tab
21 21.

22 A. Well, as you can see, in the draft that
23 Schering-Plough sent, paragraph 1 says that
24 Upsher-Smith agrees that U.S. patent number 4,863,743,
25 owned by Key Pharmaceuticals, Inc. (the '743 patent) is

1 valid and enforceable. As I said earlier, we were not
2 willing or Upsher-Smith was not willing to make that
3 agreement, so the principals were brought, as I said,
4 back onto the telephone. This was discussed with them.
5 They resolved the difference. Mr. Kapur said that
6 Upsher-Smith's version was indeed what he had in mind.
7 And the final agreement reads in the place of that
8 paragraph 1, this paragraph 1:

9 "Upsher-Smith agrees that Key Pharmaceuticals,
10 Inc. is the owner by assignment of the entire right
11 title and interest in United States Patent Number
12 4,863,743 (the '743 patent)."

13 Q. So, instead of acknowledging --

14 A. Validity and enforceability.

15 Q. -- yeah, instead of acknowledging validity and
16 enforceability and infringement, correct?

17 A. No, paragraph 1 only dealt with validity and
18 enforceability.

19 Q. Okay, take a look at paragraph 2.

20 A. Paragraph 2 in the draft that Schering-Plough
21 provided, the interim draft is what I'll call it to
22 keep the record clear, had Upsher-Smith, "acknowledges
23 and agrees that its Klor Con M20 potassium chloride
24 product is covered by and infringes the '743 patent."
25 That was another one of the provisions that was not

1 acceptable on the Upsher-Smith side. It was another
2 one of the provisions that we had the discussion with
3 the principals about after Mr. Hoffman and I had been
4 unable to reach agreement just among the lawyers.

5 And again, the principals acknowledged what
6 they intended, and that became paragraph 2 of the
7 agreement that they signed, which paragraph 2 parallels
8 what I had said in the Points of Agreement earlier in
9 the day, and I can read it into the record if you
10 desire or I cannot.

11 Q. No, I don't think that's necessary, thank you,
12 sir.

13 All right, we've just dealt with paragraphs 1
14 and 2. I'm looking at, again, the final agreement, USX
15 104 under tab 22. I'd like to direct your attention to
16 paragraph 3 immediately below what we just discussed.

17 A. Yes.

18 Q. I want to read that, and then I'm going to ask
19 you a question about it. It states:

20 "Upsher-Smith agrees that it will not market in
21 the United States its Klor Con M20 potassium chloride
22 product or any other sustained release
23 microencapsulated potassium chloride tablet prior to
24 September 1, 2001."

25 Do you see that sentence?

1 A. I do.

2 Q. Was that sentence the subject of discussion and
3 negotiation by you that evening or early morning?

4 A. Yes, it was.

5 Q. Okay. What was discussed or negotiated with
6 respect to that?

7 A. Well, again, perhaps the easiest way to do it
8 is for me to refer back to the interim draft that we
9 received from Schering-Plough. Schering-Plough's
10 version of that sentence read, "Upsher-Smith agrees
11 that it will not market in the United States its Klor
12 Con M20 potassium chloride product or any other 20
13 milliequivalent potassium chloride product prior to
14 September 1, 2001."

15 That language was, from Upsher-Smith's
16 perspective, too broad. It covered too much and
17 prohibited --

18 MR. KADES: Objection, Your Honor.

19 THE WITNESS: -- too much.

20 MR. KADES: Lack of foundation for what the
21 witness just testified to.

22 MR. CURRAN: I can rephrase the question, and
23 I'm sure that will satisfy that objection, Your Honor.

24 JUDGE CHAPPELL: Okay, so you're going to
25 withdraw the question, he's going to withdraw the

1 objection.

2 MR. KADES: Yes, Your Honor.

3 MR. CURRAN: What was said in the answer?

4 BY MR. CURRAN:

5 Q. Mr. Cannella, what did you or Mr. Troup say to
6 Schering-Plough about their proposed language in that
7 first sentence in paragraph 3?

8 A. In my conversations with Mr. Hoffman, I told
9 him that the language was too broad. It covered too --
10 it prohibited Upsher-Smith from doing too broad a
11 spectrum of activities and was not acceptable.

12 In the subsequent conversation where we had the
13 principals on the phone, I explained Upsher-Smith's
14 position to Mr. Kapur. Mr. Kapur understood it and
15 agreed that the language was too broad, and we narrowed
16 the language to the language that now appears in the
17 final version, USX 104, which now -- which then read,
18 "or any other sustained release microencapsulated
19 potassium chloride tablet."

20 Q. Okay. What you just read is the -- what was
21 ultimately adopted in the agreement, correct?

22 A. That's correct.

23 Q. And the -- before that, that parenthetical
24 expression was different, and it read, "or any other 20
25 mEq potassium chloride product"?

1 A. That's correct.

2 Q. So, it was just that parenthetical expression
3 that was the subject of discussion as far as that
4 particular sentence goes, correct?

5 A. That's correct.

6 Q. Okay. Sir, where did the September 1, 2001
7 date come from?

8 A. It was given to me earlier that day, and I
9 incorporated it into the Points of Agreement.

10 Q. Was that the subject of negotiation that
11 evening or that early morning?

12 A. No.

13 Q. And again, had that been the subject of
14 negotiation at the meeting in Kenilworth?

15 A. No.

16 Q. Had that been the subject of negotiation at the
17 telephone conference after the meeting in Kenilworth?

18 A. No.

19 Q. Sir, I want to direct your attention, still
20 within the final version of the agreement, USX 104, to
21 the paragraph numbered 11.

22 A. Is that paragraph number 11 in the cover letter
23 or in the attached -- in Exhibit A?

24 Q. In Exhibit A, sir.

25 A. Yes.

1 Q. Okay. That's the page, that (iii) at the
2 bottom?

3 A. Correct.

4 Q. FitzCella 0136.

5 A. Yes.

6 Q. Sir, let me ask a question generally, then I am
7 going to refer you specifically to this language.

8 Was Schering-Plough paying money to
9 Upsher-Smith to delay entry in this agreement?

10 A. No.

11 MR. KADES: Objection, Your Honor, no
12 foundation for the witness' knowledge.

13 MR. CURRAN: Oh, quite the contrary, Your
14 Honor. We've spent all evening laying the foundation.
15 This man participated in the negotiations, he was at
16 the front lines of the negotiations, he's in a position
17 to comment on the parties' intentions as well as
18 anyone.

19 MR. KADES: Your Honor, unless --

20 JUDGE CHAPPELL: Are you asking if he advised
21 them to pay money?

22 MR. CURRAN: No.

23 JUDGE CHAPPELL: Why --

24 MR. CURRAN: I'm asking what the intent of the
25 parties were in this agreement.

1 MR. KADES: Your Honor, unless Counsel for
2 Upsher can establish that his knowledge is based only
3 on nonprivileged information, then testimony that
4 relies as a basis on privileged information is evidence
5 that we do not -- did not have a chance to conduct
6 discovery on, and therefore, we are unable to conduct a
7 fair cross. When they decided to assert the privilege
8 in discovery as to the matters that they discussed
9 internally relating to the settlement, they made the
10 choice that -- to assert the privilege. They now can't
11 rely on inferences drawn based on those privileged
12 discussions.

13 JUDGE CHAPPELL: I agree. The way the
14 question's worded, the objection is sustained.

15 BY MR. CURRAN:

16 Q. Sir, I'd like to direct your attention to
17 paragraph 11.

18 A. Yes.

19 Q. Do you see the language where it says, "In
20 consideration for the licenses, rights and obligations
21 described in paragraphs 1 through 10 above"?

22 A. I do.

23 Q. "SP Licensee shall make the following payments
24 to Upsher-Smith"?

25 A. Yes.

1 Q. Was that language intended to indicate that
2 money was being paid in connection with the patent
3 settlement?

4 MR. KADES: Objection, Your Honor, same basis.
5 He's asking him for what his understanding of the
6 intention of the parties was.

7 MR. CURRAN: I'd like to address that, Your
8 Honor.

9 JUDGE CHAPPELL: All right.

10 MR. CURRAN: Two points: One, here last night,
11 almost exactly 24 hours ago, Mr. Orlans from complaint
12 counsel asked these same types of questions to
13 Schering-Plough's attorney Mr. Hoffman. If they can do
14 it, we can do it.

15 JUDGE CHAPPELL: You're not going to be able to
16 assert privilege and dance around it with a witness on
17 the stand, Mr. Curran.

18 MR. CURRAN: I don't think I'm doing that.

19 JUDGE CHAPPELL: If you're not going to give
20 them any information about any intent and any attorney
21 communication, you are not going to get it in the side
22 door. I don't care what Mr. Orlans did. Is that
23 clear?

24 MR. CURRAN: Yes, Your Honor.

25 JUDGE CHAPPELL: You can't dance around -- you

1 can't assert the privilege and dance around the edges
2 of it. Either it's there or it's not there. Do you
3 want to waive the privilege?

4 MR. CURRAN: I don't want to waive the
5 privilege, Your Honor.

6 JUDGE CHAPPELL: I'm giving you that choice
7 right now if you want to waive the privilege and allow
8 this information.

9 MR. CURRAN: I don't want to do anything to
10 waive the privilege, Your Honor.

11 JUDGE CHAPPELL: All right, then that question
12 is improper and the objection's sustained unless you
13 lay some foundation that gets it away from any
14 privileged communication, because when you're asking
15 him what the intent of it was, it's entangled in what
16 he talked to his client about.

17 MR. CURRAN: Well, then, Your Honor, then I
18 move to strike the testimony of Mr. Hoffman yesterday
19 under questioning by Mr. Orlans.

20 JUDGE CHAPPELL: Too late, that's overruled.

21 BY MR. CURRAN:

22 Q. Mr. Cannella, referring to paragraph 11?

23 A. Yes.

24 Q. Do you see in subparagraphs (i), (ii) and
25 (iii), there's reference to up-front royalty payments?

1 A. Yes.

2 Q. Sir, do you see in subparagraph (iv), there's
3 reference to milestone payments?

4 A. Yes.

5 Q. Sir, do you see in subparagraph (v), there's
6 reference to royalties?

7 A. Yes.

8 Q. Sir, were there discussions between
9 Upsher-Smith or Upsher-Smith representatives and
10 Schering-Plough representatives as to those payments?

11 A. Yes.

12 Q. What were those discussions?

13 A. All of those discussions -- all of those
14 discussions relating to those payments dealt with those
15 payments as consideration from Schering-Plough to
16 Upsher-Smith for Schering-Plough's acquiring of the
17 rights in the four Upsher-Smith pipeline products.

18 Q. And that was said between the parties?

19 A. That's correct.

20 Q. Sir, was there discussion between the parties
21 as to whether or not these payments were contingent or
22 noncontingent upon anything?

23 A. Well, certainly -- the answer is yes.

24 Q. What was discussed or stated in that regard?

25 A. Well, with respect to the first payment --

1 well, indeed, with respect to the entire agreement,
2 including the first payment, it was all contingent upon
3 board approval by Schering-Plough. So, until there was
4 Schering-Plough board approval, there was no
5 entitlement to the payments.

6 Q. Beyond the board approval, was there any other
7 discussion as to whether or not these up-front royalty
8 payments were contingent or noncontingent?

9 A. Yes, I believe there was.

10 Q. What was stated in that regard?

11 A. Well, it was a staged payment. There were
12 three "up-front payments," but the license grants from
13 Upsher-Smith to Schering, which I believe are reflected
14 in paragraphs 7, 8, 9 and 10 of the agreement, give
15 Schering rights to certain things, including trade
16 secrets and know-how.

17 The understanding between -- the discussion and
18 understanding between the parties was that if
19 Upsher-Smith somehow failed to provide that know-how
20 and those trade secrets if called upon by
21 Schering-Plough to provide it, that that would be --
22 would impact the rest of the agreement.

23 Q. Sir, I would like to direct your attention to
24 paragraph 12, which is on page (v) for 5, FitzCella
25 number 0138. Do you see that, sir?

1 A. I do.

2 Q. And this is also part of that Exhibit A to the
3 final agreement, correct?

4 A. Yes, yes.

5 Q. Sir, I'm going to read that paragraph and then
6 ask you if there was discussion about this provision.

7 "In the event that any court or governmental
8 authority or agency rules that the licenses granted to
9 the SP Licensee are void or invalid, then all such
10 rights which are ruled to be invalid shall terminate
11 and Upsher-Smith shall have the right, at its sole
12 discretion, to purchase back, for nominal
13 consideration, all such terminated rights. Any of
14 Schering's payment obligations under the Detailed
15 Agreement relating to such invalidated rights which
16 have not become due and payable prior to the date of
17 such ruling shall thereupon terminate."

18 Sir, was that provision the subject of
19 discussion?

20 A. Yes.

21 Q. What was said about that provision?

22 A. I can't be precise as to who said what about
23 the provision, but the parties clearly did discuss the
24 concept of what happens if we need to unwind this deal,
25 and this provision I believe is designed to cover that.

1 Q. Sir, I'd like to call your attention to
2 paragraph 20, which is three pages later in the
3 document.

4 A. Yes.

5 Q. Do you see that paragraph, sir?

6 A. Yes.

7 Q. I don't want to read this whole thing, but sir,
8 that appears to be a force majeure provision, correct?

9 A. Correct.

10 Q. Sir, I want to call your attention specifically
11 to the parenthetical, "except the obligation to make
12 payments when properly due."

13 Do you see that?

14 A. I do.

15 Q. Let me ask two questions. First, was paragraph
16 20 the subject of discussion or negotiation at all
17 between the parties?

18 A. No.

19 Q. Was the parenthetical within paragraph 20 that
20 I've just read the subject of any discussion or
21 negotiation between the parties?

22 A. No.

23 Q. Sir, I'd like to -- within the same document,
24 I'd like to refer your attention to the third page from
25 the start of the document. It's the page with the

1 number 2 at the bottom. That's because there is a
2 cover letter on top.

3 A. Yes, I have it.

4 Q. Okay. And for the record, I want to know if
5 this is FitzCella 0132.

6 A. That's correct.

7 Q. Sir, at the bottom of that page and then
8 carrying over to the following page, there's another
9 force majeure provision, correct?

10 A. Yes.

11 Q. Was that provision the subject of any
12 discussion or negotiation between the parties?

13 A. No.

14 Q. Was the parenthetical expression "except the
15 obligation to make payments when properly due" the
16 subject of discussion or negotiation between the
17 parties?

18 A. No.

19 Q. Sir, do you know how -- do you know where that
20 language came from? Let me -- let me clarify the
21 question.

22 Do you know where these force majeure
23 provisions came from?

24 A. They came from Schering-Plough, and they appear
25 to be boilerplate force majeure provisions.

1 MR. CURRAN: Your Honor, no further questions.

2 JUDGE CHAPPELL: Thank you.

3 Is Schering going to question this witness?

4 MR. NIELDS: No, Your Honor, we have no cross
5 exam.

6 JUDGE CHAPPELL: Okay.

7 Any cross?

8 MR. KADES: Yes, Your Honor.

9 CROSS EXAMINATION

10 BY MR. KADES:

11 Q. Good evening, Mr. Cannella. My name is Michael
12 Kades, and I'll be questioning you on behalf of
13 complaint counsel.

14 Mr. Cannella, isn't it correct that you only
15 attended one meeting in person with Schering
16 representatives?

17 A. That's correct.

18 Q. And that's the meeting that occurred at -- a
19 meeting that occurred in around June 10th, 11th or 12th
20 at Schering's offices?

21 A. That's correct.

22 Q. You weren't at a meeting with Mr. Troup and Mr.
23 Driscoll in Mr. Driscoll's office in the spring of
24 1997?

25 A. I was not.

1 Q. So, you have no firsthand knowledge of what was
2 discussed at that meeting?

3 A. I do not.

4 Q. You were not at a May 28th meeting at
5 Upsher-Smith's offices to discuss the patent litigation
6 between Upsher and Schering?

7 A. I was not.

8 Q. So, you have no firsthand knowledge of what was
9 discussed at that meeting.

10 A. I do not.

11 Q. You were not at a June 3rd, 1997 meeting held
12 at Upsher-Smith's offices.

13 A. I was not.

14 Q. So, you have no firsthand knowledge of what was
15 discussed at that meeting.

16 A. That's correct.

17 Q. Now, Mr. Cannella, prior to your -- the
18 Kenilworth meeting, you said you had a phone call with
19 Mr. John Hoffman?

20 A. That's correct.

21 Q. And I believe you testified that in that
22 conversation, Mr. Hoffman raised antitrust
23 sensitivities about the upcoming meeting?

24 A. Yes, he did.

25 MR. KADES: Your Honor, may I approach the

1 witness?

2 JUDGE CHAPPELL: Yes.

3 BY MR. KADES:

4 Q. Mr. Cannella, I'm handing you what is the
5 transcript from the deposition you gave in October of
6 this year.

7 A. Yes.

8 MR. CURRAN: I'd like a page reference, if I
9 may.

10 MR. KADES: I will get you a page reference.

11 BY MR. KADES:

12 Q. If you would turn to page 50 of your -- of the
13 transcript.

14 A. I'm sorry, page 50?

15 Q. Yes, 5-0.

16 A. Yes.

17 Q. Now, at page 50, you were asked:

18 "QUESTION: I believe you mentioned that prior
19 to this meeting, you had a telephone conversation with
20 Mr. Hoffman concerning setting up this meeting. Is
21 that correct?

22 "ANSWER: That's my general recollection, yes.

23 "QUESTION: Was anybody other than yourself and
24 Mr. Hoffman present during that -- during that
25 telephone conversation?

1 "ANSWER: I don't believe so.

2 "QUESTION: You mentioned that that telephone
3 conversation related to setting up the logistics of the
4 meeting and I believe excluding the debate over the
5 merits of the lawsuit. Is that correct?

6 "ANSWER: Yes.

7 "QUESTION: Was there anything else mentioned
8 or discussed in that telephone conversation with Mr.
9 Hoffman?

10 "ANSWER: Not that I recall."

11 Was that your testimony, sir?

12 A. Yes, it was, but as that testimony indicates, I
13 had been asked about that subject matter earlier in the
14 deposition, and earlier in the deposition, I -- I don't
15 know exactly where you'll -- you'd find it, sir, but
16 earlier in the deposition, I testified that Mr. Hoffman
17 and I had a discussion of ground rules and I mentioned
18 the ground rule of no debate. The other ground rule
19 was the sensitivity to antitrust issues, which I did
20 not mention, but I was not directly asked it.

21 Q. So, in the testimony -- the other testimony
22 you're referring to, you mentioned the exclusion of the
23 discussion about patent issues and ground rules. Is
24 that correct?

25 A. I'm not sure I understand your question.

1 Q. Okay, well, why don't we take a look at that
2 testimony. If you could turn to page 46?

3 A. Yes.

4 Q. I believe beginning on page 8 -- there's
5 testimony from you, "I cannot be terribly precise, Mr.
6 Narrow, but I do recall that prior to the meeting, I
7 was involved in a telephone discussion with Mr.
8 Hoffman, the in-house lawyer from Schering-Plough, and
9 my recollection of that conversation was that it was
10 designated primarily to set up the logistics of the
11 meeting, to identify the participants and to lay the
12 ground rules that this was not to be a debate over the
13 merits of the lawsuit but an opportunity for the
14 business people to explore business opportunities
15 together."

16 Was that the testimony you were referring to a
17 moment ago?

18 A. Yes, it is.

19 Q. Mr. Cannella, you testified that the -- by the
20 time of the settlement of the patent litigation, the
21 summary judgment motions that Upsher had filed had not
22 been granted.

23 A. That's correct.

24 Q. Had they been denied?

25 A. They had not.

1 Q. So, they were pending at the time of the
2 settlement?

3 A. That's correct. Argument on those motions was
4 heard the day before the trial was to start.

5 Q. Mr. Cannella, at the meeting you attended in
6 New Jersey, did you say anything at all at that
7 meeting?

8 A. I believe I answered that on direct. No, I did
9 not.

10 Q. Now, and prior to the phone call with Mr.
11 Hoffman, you had not had any dealings with anyone from
12 Schering concerning settlement of the patent
13 litigation.

14 A. That's correct.

15 Q. And besides the meeting you attended in New
16 Jersey, the only communications with Schering that you
17 participated in concerning the settlement of the patent
18 litigation were those discussions that occurred on the
19 day of the settlement.

20 A. No, that's not correct.

21 Q. If you would turn to page 71.

22 A. Yes.

23 Q. Starting at line 4:

24 "QUESTION: Subsequent to the meeting in New
25 Jersey that you attended, did you participate in any

1 communications between Upsher-Smith and Schering-Plough
2 concerning settlement of the '743 patent litigation?"

3 There was an objection.

4 "ANSWER: Yeah, if I'm understanding your
5 question correctly, I would answer yes, because on
6 the -- I guess on the day of the settlement, I
7 participated in the discussions and the drafting of the
8 papers memorializing the settlement and the business
9 deal.

10 "QUESTION: Okay. Did you participate in
11 communications between the parties concerning the
12 settlement negotiations other than what you have just
13 described which occurred on the day of the settlement?

14 "ANSWER: No."

15 Was that your testimony, sir?

16 A. It was. That's not inconsistent with what I
17 said. I participated in a business arrangement
18 exploration meeting in Kenilworth, New Jersey. I
19 participated in a subsequent telephone conference where
20 that business arrangement was the subject of the
21 discussion. In neither of those discussions were
22 settlement of the patent lawsuit discussed. The only
23 time I became involved in any discussion that involved
24 settlement of the patent litigation was on the day and
25 night the papers were signed.

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1 Q. Which I believe was my question to you before
2 we went to your transcript.

3 A. If it was, I misunderstood it, sir.

4 Q. Mr. Cannella, on direct you testified that you
5 also participated by phone in another conference after
6 the New Jersey meeting.

7 A. Yes, that's what I just made clear to you, yes.

8 Q. And you testified that in that meeting, you
9 have a general recollection that Mr. Kapur from
10 Schering asked pointed questions about the Niacor-SR
11 product?

12 A. I can't be precise as to which of the products
13 he asked pointed questions about, but he certainly was
14 informed as to the products that were being discussed.

15 Q. Do you remember any of the specifics that Mr.
16 Kapur discussed?

17 A. I do not.

18 Q. Do you remember whether he discussed Schering's
19 understanding of the FDA approval status of the
20 products at issue?

21 A. I'm afraid I can't go to that level of detail
22 as to a telephone conference five years ago.

23 Q. Do you remember whether Mr. Kapur discussed
24 anything about the patent status of any of the products
25 that Schering was considering licensing from Upsher?

1 A. I don't recall that discussion. I'm not saying
2 it didn't take place, but I just don't recall.

3 Q. Do you recall whether Mr. Kapur discussed
4 anything about the market potential of any of the
5 products in that phone call?

6 A. Again, in general terms, yes, very clearly, the
7 parties were discussing the market potential of the
8 products. If you were to ask me to be specific on
9 product by product what that discussion was and what
10 the parties' respective views of their market potential
11 was, I'm afraid I couldn't do that.

12 Q. Well, other than market potential, do you --
13 you don't remember the topics that Mr. Kapur discussed
14 specifically at that phone conversation.

15 A. I wouldn't agree with that. I do recall, as I
16 said earlier, that the parties discussed valuation of
17 these products and what Upsher-Smith was looking for to
18 transfer rights in the products and what
19 Schering-Plough was offering to acquire those rights.

20 Q. In terms of the due diligence Schering had done
21 as to the products, what topics did Mr. Kapur discuss?

22 A. I couldn't tell you with great precision.

23 Q. Can you tell us with any precision?

24 A. No.

25 Q. Mr. Cannella, you testified that there was no

1 discussion of an entry date related to the patent
2 litigation at the New Jersey meeting that you attended.

3 A. That's correct.

4 Q. So, if Mr. Hoffman testified that there was, in
5 fact, such a -- was such a discussion, his testimony
6 would not comport with your memory of that meeting.

7 A. That's correct, it would not.

8 Q. And if Mr. Troup testified that there was
9 discussions about the entry date at the meeting in
10 Kenilworth, his testimony would not comport with your
11 understanding.

12 MR. CURRAN: Objection, foundation, Your Honor.

13 MR. KADES: Your Honor, if I may be heard?

14 JUDGE CHAPPELL: Okay.

15 MR. KADES: Your Honor, I believe it is fair
16 and the cross examiner is allowed to put questions to
17 the witness where they have a good faith belief of the
18 underlying facts, rather than taking everybody's time
19 and going through the deposition testimony that Mr.
20 Cannella -- or the investigational hearing of Mr. Troup
21 that Mr. Cannella was not present for and which is not
22 relevant to the question. As long as I have a good
23 faith belief that, in fact, there is testimony in
24 evidence, I can ask him the question.

25 MR. CURRAN: Your Honor, the question is also

1 argumentative. I think it lacks foundation. I agree,
2 we don't want to spend too much time tracking down Mr.
3 Kades' good faith belief here.

4 JUDGE CHAPPELL: Well, the way I read it on
5 CaseView, if mine doesn't have a typo on it, it perhaps
6 is somewhat argumentative, but it is cross examination.
7 So, I'll overrule the argumentative objection, and he's
8 just asking the witness to agree or disagree. I'm
9 going to allow it. So, the objection's overruled.

10 BY MR. KADES:

11 Q. Do you need the question read back?

12 A. No, I really could use the question back.
13 Thank you.

14 (The record was read as follows:)

15 "QUESTION: And if Mr. Troup testified that
16 there was discussions about the entry date at the
17 meeting in Kenilworth, his testimony would not comport
18 with your understanding."

19 THE WITNESS: That's correct. I have no idea
20 what Mr. Troup testified about, nor what Mr. Hoffman
21 testified about.

22 MR. KADES: If I can have a moment, Your Honor?

23 JUDGE CHAPPELL: Yes.

24 MR. KADES: Well, Your Honor, showing that
25 learned behavior, we start puffing time, I believe I

1 have taken less than a half hour, and I have no further
2 questions.

3 JUDGE CHAPPELL: Not bad, but the official
4 clock is the one on the CaseView, just so you know.
5 You have nothing further.

6 Any redirect?

7 MR. CURRAN: No redirect, Your Honor.

8 JUDGE CHAPPELL: Okay. Is this witness
9 subpoenaed to testify later in the case or is he
10 finished?

11 MR. CURRAN: I believe he's finished, Your
12 Honor. He appeared here today under subpoena.

13 JUDGE CHAPPELL: Okay.

14 Thank you, Mr. Cannella, you're excused.

15 THE WITNESS: Thank you, Your Honor.

16 JUDGE CHAPPELL: Remember tomorrow we're going
17 to wrap up no later than 2:45, so between 2:30 and
18 2:45. We'll adjourn until tomorrow morning at 9:30.

19 (Whereupon, at 6:10 p.m., the hearing was
20 adjourned.)

21

22

23

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25

1 C E R T I F I C A T I O N O F R E P O R T E R

2 DOCKET/FILE NUMBER: 9297

3 CASE TITLE: SCHERING-PLOUGH/UPSHER-SMITH

4 DATE: FEBRUARY 14, 2002

5

6 I HEREBY CERTIFY that the transcript contained
7 herein is a full and accurate transcript of the notes
8 taken by me at the hearing on the above cause before
9 the FEDERAL TRADE COMMISSION to the best of my
10 knowledge and belief.

11

12 DATED: 2/15/02

13

14

15

16 SUSANNE BERGLING, RMR

17

18 C E R T I F I C A T I O N O F P R O O F R E A D E R

19

20 I HEREBY CERTIFY that I proofread the
21 transcript for accuracy in spelling, hyphenation,
22 punctuation and format.

23

24

25 DIANE QUADE

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